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ABSTRACT

This health education curriculum presents information and basic health maintenance concepts and practices. The curriculum is comprised of two courses consisting of six units of instruction: (1) Health Information, (2) First Aid, (3) Major Health Problems, (4) Home Care of the Ill, (5) Family Life Education, and (6) Dental Hygiene. Each unit begins with a Unit Learning Experience Guide that gives directions for unit completion. The remainder of each unit consists of Learning Activity Packages (LAP) that provide specific information for completion of a learning activity. Each LAP is comprised of the following parts: objective, evaluation procedure, resources, procedure, supplemental sheets, study guide, and a LAP test with answers. (LRA)

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MOUNTAIN PLAINS LEARNING EXPERIENCE GUIDE:

Curriculum Area: Health Education, Family Core Curriculum.

CE 027 821

U S DEPARTMENT OF HEALTH,
EDUCATION & WELFARE
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Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Experience Guide

CURRICULUM AREA: HEALTH EDUCATION,
FAMILY CORE CURRICULUM

DESCRIPTION:

The Health Education program presents health information and basic health maintenance concepts and practices.

Information provided includes: health problems and symptoms; health maintenance resources; health related products and services; and physiology of the human reproductive system.

Concepts and practices presented include: family planning; dental hygiene; health maintenance; basic first aid to handle emergencies; health problems prevention; and care of ill and disabled at home.

RATIONALE:

Accidents, illness and other health problems have a disruptive influence on both the individual and family. Understanding the principles involved in prevention, treatment and care of health problems will enable one to make better decisions and take more successful actions. The more knowledge one has about these principles and information about available health resources, the more likely will be the reduction of individual and family problems. There will also tend to be developed an ability to more successfully cope with the problems.

PREREQUISITES:

None

OBJECTIVES:

Identify the principles and practices of family health maintenance, first aid and appropriate utilization of health resources.

RESOURCES:

A resource list is attached. This list indicates the books, films, etc. believed necessary for completing this curriculum area program.

Principal Author(s): L. Leland

GENERAL INSTRUCTIONS:

The Health Education program is made up of curriculum components from two courses. Each course and unit of the curriculum has a Learning Experience Guide (LEG) that gives directions about completing that component.

Before beginning any part of the program, a pretest is taken. This pretest covers concepts used in the complete program and is used to determine which skills and knowledges the student has at present and which need to be learned.

After the pretest is completed and scored, a plan may be made that identifies the parts of the program one needs to successfully achieve the goal for the Health Education student. The plan may also give the order in which the program parts are to be completed.

This program plan basically involves identifying the successfully completed or prevalidated units on the Student Progress Record (SPR). The student then has a record that specifically states what is completed and what remains to be accomplished in the Health Education program.

The general procedure for the Health Education program is as follows:

1. Read the curriculum area LEG for this program.
2. Take the Health Education program pretests.
3. Begin and complete the first assigned course. Each course LEG describes the procedure for accomplishing the course. The SPR indicates the units and Learning Activity Packages (LAPs) the student is to complete in the course.
4. Proceed to the remaining course and complete it.
5. Take the Health Education program post test.

CURRICULUM COMPONENTS:

The curriculum components (courses, units and LAPs) for the Health Education program are listed on the attached SPR.

EVALUATION PROCEDURE:

Evaluation is by pre and post testing using a multiple-choice type of test.

The test is used as a pretest to determine which units, if any, the student may be able to validate. The student is considered validated for a particular unit if 4 out of 5 items are correctly answered for each LAP part on the pretest.

The test will also be taken by the student as a post test to determine any changes resulting from taking all or part of the program.

FOLLOW-THROUGH:

After reading this guide, take the Health Education pretests.

RESOURCE LIST

Printed Materials

1. First Aid. Fourth Edition, American Red Cross, 1973.
2. Rescue Breathing. Third Edition, Health Education Center, New York Department of Health, 1972.
3. Student Health Handbook. Second Edition, Mountain-Plains Education & Economic Development Program, Inc., February 1974. (For student's personal use--not assigned in Learning Activity Packages.)

Audio/Visuals

16 mm Films:

1. Bleeding and Bandaging. Medical Self-Help Films. U.S. Department of Health, Education and Welfare, Washington, D.C.
2. Shock. Medical Self-Help Films, U.S. Department of Health, Education and Welfare, and Department of Defense, 1967.

35 mm Filmstrip/Cassettes:

Series: First Aid As It Happens, Eye Gate House, Inc., Jamaica, N.Y., 1971.

3. Artificial Respiration #X-228-C.
4. Poisonings, Burns and Injuries To Bones #X-228-D.

Equipment

1. First Aid Facts wall chart.
2. Player, 35 mm filmstrip/cassette.
3. Practoplast burn examples.
4. Projector, 16 mm filmstrip.
5. Resusci-Anne.
6. Sample first aid kit.

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Printed Materials

1. Break the Chain of Tooth Decay (pamphlet). American Dental Association, Chicago, Illinois.
2. Home Nursing Programmed Instruction Student's Manual. American Red Cross.
3. How to Take the Worry Out of Being Close. Gray and Gray, Oakland, California, 1971.
4. Student Health Handbook. Second Edition, Mountain-Plains Education & Economic Development Program, Inc., February 1974. (For student's personal use--not assigned in Learning Activity Packages.)
5. Venereal Disease (pamphlet). American Medical Association.
6. Voluntary Sterilization for Men and Women. Planned Parenthood Federation of America, Inc., 1970.
7. Why You Should Use Dental Floss (pamphlet). Johnson & Johnson, New Brunswick, New Jersey.

Audio/Visuals

35 mm Filmstrips:

1. Infectious Desease: Causes and Defenses (Immunization 1/551-C-51). Encyclopedia Britannica Films, Inc.
2. Microorganisms That Cause Disease (Immunization 1/553-C-51). Encyclopedia Britannica Films, Inc.
3. Female Reproductive System. McGraw-Hill.
4. Male Reproductive System. McGraw-Hill.
5. Venereal Disease: A Present Danger (Parts I & II). Guidance Associates Filmstrips, 1972. (filmstrip and cassette)

Equipment

1. Dental floss, unwaxed.
2. Projector, 35 mm or filmstrip/cassette player.
3. Thermometer, oral.
4. Thermometer, rectal.
5. Toothbrush.

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Glasgow AFB, Montana 59231

Learning Experience Guide

COURSE: INTRODUCTION TO HEALTH EDUCATION
(FAMILY CORE CURRICULUM)

DESCRIPTION:

This course presents basic concepts of health information on the selection and use of clinical facilities for health maintenance. Basic First Aid Techniques are also covered in order to equip students to handle minor accidents and illnesses and to be able to determine when to seek medical attention.

RATIONALE:

This course should assist the student to become more self-sufficient in handling personal health problems as well as promoting better health care.

OBJECTIVES:

Correctly perform mouth-to-mouth artificial respiration on Resusci-Anne and recognize symptoms associated with certain medical emergencies and be able to provide first aid treatment until medical help is available.

RESOURCES:

See Resource List attached.

GENERAL INSTRUCTIONS:

Using the Health Education Course I Notebook, complete each LAP marked in the prescribed column of the SPR. When all prescribed LAPs have been completed, you will be given the Course 01 unit tests.

UNIT TITLE:

.01 Health Information
.02 First Aid

Principal Author(s): D. Ensrud, P. Myers

EVALUATION PROCEDURE:

100% accuracy required on instructor checklist on artificial respiration and 80% or better required on written test.

FOLLOW-THROUGH:

Go to the first assigned unit.

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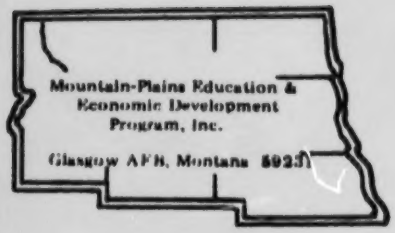

Learning Experience Guide

UNIT: HEALTH INFORMATION

RATIONALE:

The health care industry teaches everyone in today's society. People can be wise consumers of health products, services and information when their proper selection and use is known.

OBJECTIVE:

Be able to utilize routine and emergency health services available in your area and identify selected definitions and use certain health services.

RESOURCES:

Mountain-Plains Produced LAPs.

GENERAL INSTRUCTIONS:

Read the cover sheet for each prescribed LAP and follow the directions on each procedure step. Mark the time it takes you to complete each LAP on the SPR. If you do not understand what to do after reading the procedure steps, consult your instructor.

PERFORMANCE ACTIVITIES:

.01 General Health Information
.02 GAP: Health Information

EVALUATION PROCEDURE:

Complete the post test for each LAP as you finish it.

FOLLOW-THROUGH:

Go to the first assigned LAP.

Principal Author(s): D. Ensrud, P. Meyers

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Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: General Health Information

OBJECTIVE:

Recognize types of health services available here, how to select and use them. You will recognize the titles used for health specialists and be able to keep records.

EVALUATION PROCEDURE:

80% score on a 20 item multiple-choice objective Unit/LAP test.

RESOURCES:

Information Sheets: "Types of Health Services"
"Selecting Health Services"
"Health Expenses"
"Use of Health Services"
"Specialists"
"Health Records"

PROCEDURE:

1. Read information sheets mentioned above.
2. Complete study guide.
3. Complete Unit/LAP test with 80% score after completing this LAP and GAP 51.01.01.02.

Principal Author(s): P. Myers

Information Sheet: Types of Health Services

Each family must decide what professional help they will need to meet their individual health needs. The selection of the right professional help is most important to your entire family. Although many people only think about health services when an illness occurs, preventative health services are available which can prolong life and lower medical expense. In some areas the need for health services is increasing at a faster rate than the available service.

The increased need for health services is due to many reasons:

Increased population - fewer children die and people live longer. The youngest and oldest age groups also need more health care than people in other age groups.

People are more concerned about health. We have come to recognize life can be more enjoyable and longer with good health. There is also more emphasis on preventing illness instead of just seeking medical care in case of illness.

New methods for preventing and treating illnesses are being discovered. This has changed the type of health service available to people - there are highly trained physicians and technicians in a specific field - specialists.

Health services can be found in a variety of places:

Clinics - usually have a variety of services such as X-Ray or Laboratory. There may be one or several physicians involved in a clinic. Clinics can offer generalized medical care (a family physician) or be specialized (such as ears, eyes, nose and throat). Clinics can be operated by private physicians, the local or state health department or by a federal agency.

Hospitals - if hospitalization is required, a physician who is on the hospital staff will be on call in case of the person's care. Hospitals also offer services from nurses, dieticians , and other health specialists.

Dentists - usually found in private practice may also be involved in special projects.

Ambulance Services - sometimes operated by private persons or in connection with a fire department or hospital.

Wherever you are living, you should be aware of what health services are available to you and how to obtain them when needed. Emergency phone numbers should be written near your phone in plain sight.

Information Sheet: Selecting Health Services

The first step in planning your family's health care is to choose a well-trained, honest physician. Choosing your family physician requires some knowledge on your part, too. A family physician can take care of your health needs and can help to get services of a competent specialist when needed. Sometimes it is difficult to choose a family physician. The following recommendations should be helpful to you:

Ask persons you can trust and respect, who are knowledgable - such as a nurse or the secretary of the local medical society.

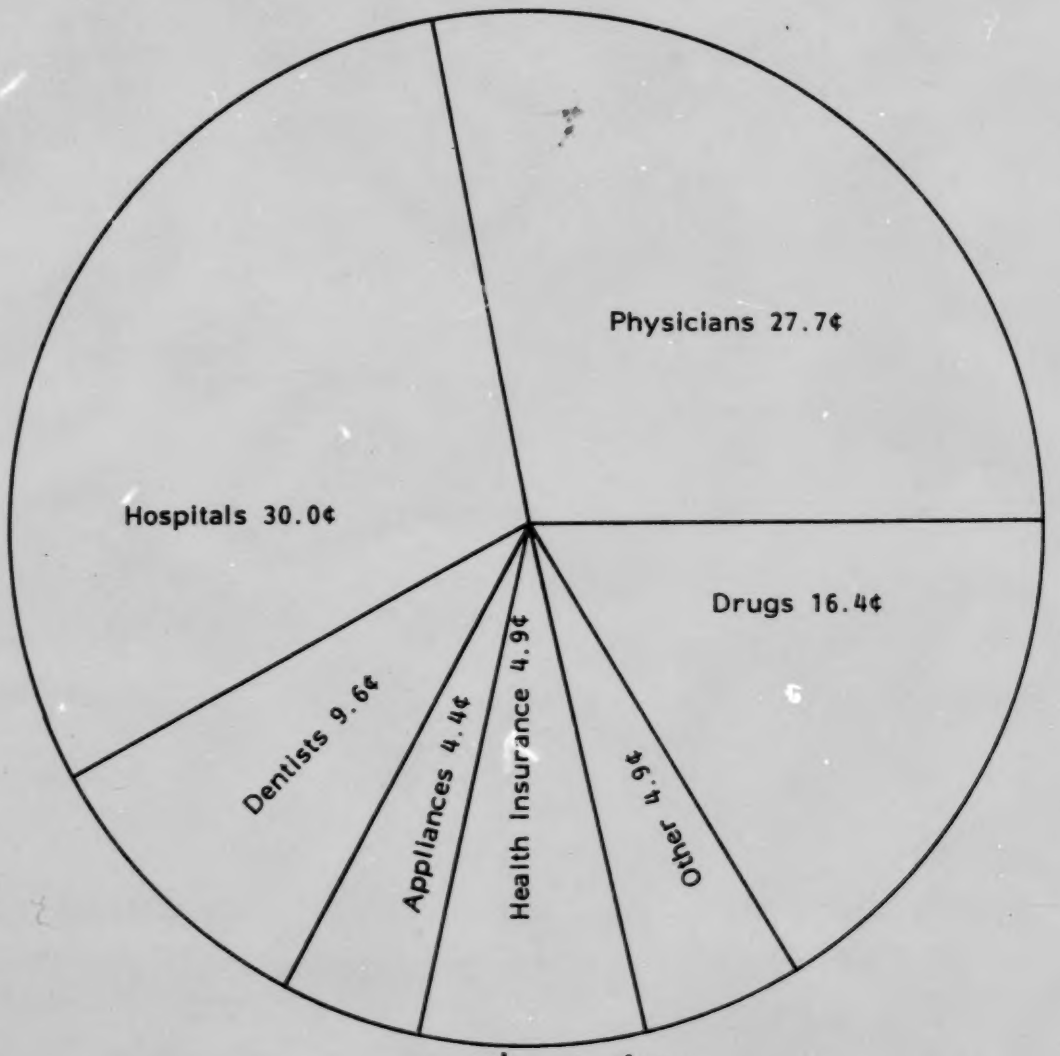
Look up the doctor's professional background in the American Medical Directory which is available in most public libraries. This will list each doctor's medical training, specialty, medical society memberships and any teaching affiliations he may have.

You must help the physician you choose by giving all the information needed and following the advice given. If you are in doubt about what to do, ASK your doctor for clarification. If you are not satisfied with the services you receive, choose another doctor. YOU SHOULD HAVE A DOCTOR WHO TAKES AN INTEREST IN YOU AND IN WHOM YOU HAVE COMPLETE CONFIDENCE.

Information Sheet: Health Expenses

The cost of medical care is a problem that every family must face up to. The cost of medical care will be different for each family as each will have its own needs. One fact remains true for every family, however - each family is responsible to pay for the Health services it receives.

The costs of Health care are high and will go higher as consumers of Health care demand more Health protection and higher-quality care. You can expect to pay approximately 5% of your income on Health care. The following diagram represents how the medical care dollar is spent in the United States.



Some Health expenses can be covered through various kinds of financial aid. Examples of financial aid are:

Insurance - This subject will be covered in more detail in another LAP.
Medicare - government funds for people over 65.
Medicaide - government funds for people under 65 who qualify for the program (blind, dependent children).
Private organizations - government of charitable organizations.

While involved in the Mountain Plains program you are responsible for all Health expenses you may incur. Financial assistance is available for families unable to meet their obligations. This policy was explained during the orientation to Administrative Services.

Wise families keep a careful accounting of their Health expenses. This enables you to keep all accounts paid up and have the receipts available if needed for tax purposes. Attached is a form you can use to record your family's Health expenses during your stay at Mountain Plains.

Information Sheet: Health Records

Each family should have a record of the basic facts about the health of each member of the family. This kind of record is often needed for a variety of reasons -

- entering school - elementary, sports activities, college
- applying for insurance
- a doctor's filling out a medical history
- applying for a job
- entering children in a special program such as camp or a day care center
- certain accidents and illnesses can be treated better when past history is accurate

It is very easy to forget what may turn out to be an important fact unless it is written down. Health records should be considered vital information and can be of permanent value. Such records should be kept in a safe place but where they can be easily located when needed. To be valuable, the records must be kept current - that is, when something needs to be added, do it immediately before you forget.

Health records can only be of value when kept carefully. You can start keeping them at any time; put down all the information you already have. Take your records with you when you see a doctor, for new additions and for any information the doctor may need.

There are many ways to keep Family Health records. Some families may wish to write the information on a sheet of paper in the children's baby books, or in a record book specifically for Health purposes.

At the time of your first interview with the Health Education instructor, you will be asked more about the kind of Health records your family keeps.

Health Expense Record

Year - 1973

Exs. of Health Expenses	Service Received	Date Done	Cost	Ins. Pymt.	Other Pymt.	Total Paid
Drs. visits	Drs. visit-Glasgow Clinic for Donna	2/13	$ 8.50	-----	$ 8.50	$ 8.5
Drugs	Medicine Rx13897 Combs Drug	2/13	4.50	-----	4.50	13.0
Diagnostic Test	X-Ray Glasgow Clinic for Donna	2/13	15.00	15.00	------	28.0
Eye	Dr. Knierim Exam and glasses-Jami	3/23	45.00	-----	45.00	73.0
Hospital	Deaconess Hospital Emerg. Room - Keri	4/16	12.50	12.50	-------	85.5
Dental	Dr. Martens check & two fillings-Pete	5/7	25.00	------	25.00	110.0

51.01.01.01.A1 FCC

Health Expense Record

Year

Service Received	Date Done	Cost	Ins. Pymt.	Other Pymt.	Total Paid

Information Sheet: Use of Health Services

Just as you expect high-quality care when you purchase health services, the health services has the right to expect certain things from you - the consumer. Things can go much smoother when the consumer uses the service in good faith. Good consumer practices in using Health Services are:

1. Make appointments as far ahead of time as possible. This will enable the health service to plan each day to prevent inconvenience for all clients as much as possible.

2. "Drop-In" visits to a health service should only be made in case of emergencies or if specifically directed by the Health Service to do so. What conditions are emergencies are covered in another LAP.

3. Arrive on time for your appointment. If you can't keep an appointment, notify the health service as far ahead as possible. When people don't keep their appointments, the service and other clients are inconvenienced.

4. Follow the instructions and recommendations of the professional persons at the health services. If you do not understand what to do or why you are to do it, it is your responsibility to ASK for clarification.

5. Keep all bills due to health reasons paid up. If for some reason you are unable to pay a bill in full, talk with the appropriate person at the health service to make suitable arrangements. Most health services will be able to work out arrangements that will allow you to pay what you are able to each month.

6. Be sure all visits to the health service are needed. Know what health problems can be handled by you at home. Health Education will help you determine this.

Each health service needs this cooperation to offer high quality and efficient care to its clients. How you meet your responsibilities to the health services will affect the quality of care you receive. The wise use of health services is encouraged.

Information Sheet: Common Health Specialists

There has been a great increase in knowledge about medicine. Medical science has grown so greatly no one person can learn and know every thing in every field. Because of this some physicians devote extra years of study to one system of the body or one area of diagnosis and treatment. These physicians are called specialists and deal only with their area of speciality.

Every physician has the following preparation:

four years of college in premedical work
four years of medical school
one or two years of internship
pass a medical board examination in the state in which he/she will work to receive a license to practice

Some physicians decide to specialize once they have completed the above. They must then:

spend three to five years in specialized graduate study and experience
pass an examination by the medical speciality board

The following is a list of medical specialties and a brief description of what each does for your information. The specialties marked with a * are common specialties with which you should be familiar. A general practitioner offers a wide variety of medical service not limited to any one field of medicine or specialty.

Title	Brief Description of Services
Allergist	treats diseases such as hay fever, asthma and other allergies
Anesthesiologist	administers anesthesia during surgery
Cardiologist	treats diseases of heart and circulatory system disorders
Dermatologist	treats diseases of skin, hair and scalp
*Gynecologist	specialize in the function and diseases of female reproductive organs
Internist	diagnoses and nonsurgical treatment of internal conditions
Neurologist	treats disease of the nerves and brain that have a physical basis
*Obstetrician	cares for women during child bearing years - prenatal, problems with pregnancy and childbirth
*Opthalmologist	treats diseases and disorders of the eye and vision
Orthopedist	treats disorders of the bones and joints
*Pediatrician	cares for children up to 12-15 years of age
Psychiatrist	treats mental and emotional disorders
*Radiologist	uses X-Ray for diagnosis and treatment of diseases
*Surgeon	general surgery or specialization in one branch of surgery
Urologist	treats diseases of the urinary system

The initials M.D. following a physician's name mean Medical Doctor.

Dentists examine and treat the teeth and the tissue surrounding the teeth.

Every dentist has the following preparation:

four years of college on predental work
four years of dental school
pass a dental board examination in the state in which he/she will work

Dentists can also specialize after having 2-4 years of specialized graduate study. Below are listed dental specialties and a brief description of what each does.

Title	Brief Description of Services
Oral Surgeon	treats diseases, injuries and deformation of teeth, jaw and mouth
Orthodontist	straightens teeth, corrects bite and places teeth in proper alignment
Pedodontist	dental care for children

The initials D.D.S. following a dentist's name mean Doctor of Dental Surgery - D.D.M. means Doctor of Dental Medicine.

There are other persons who work in the health service field. A description of those services can be found on pages 282-300 in the textbook Health Education for Young Adults. This book is available for your use at the reference desk.

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow A.F.B., Montana 59231

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Group Activity Package

Student: _____

Date: _____

TITLE: Health Information

OBJECTIVE:

As a result of group interaction, you will be provided with the opportunity to share ideas and opinions with others. The instructor may reinforce content of the LAPs. A change in learning methods will provide variety to independent study.

EVALUATION PROCEDURE:

Pending

PREREQUISITES

Complete Unit .01 LAPs

RESOURCES:

Writing materials
Surroundings favorable for group discussion

PROCEDURE:

Steps

1. Sign up for discussion group to be held at a mutually convenient time.
2. Introduction of topics "General Health Information" by instructor.
3. Group interaction.
4. Summary.
5. Evaluation.

Principal Author(s): P. Myers

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Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Experience Guide

UNIT: FIRST AID

RATIONALE:

Knowing the proper steps to take in case of sudden illness or an accident can sometimes lessen the severity of the situation.

OBJECTIVE:

Define first aid and list the responsibilities and general directions of the person administering first aid; demonstrate the administration of mouth-to-mouth resuscitation using Resusci-Anne; identify correct action to take in selected accident situations; and match the correct use of basic first aid supplies from a given list.

RESOURCES:

Printed Materials

First Aid, 4th Edition, American Red Cross.

First Aid Facts Wall Chart, Johnson & Johnson.

"Rescue Breathing," 3rd Edition, Health Education Center, N.Y. Department of Health, 1972.

Audio/Visuals

16 mm Films:

Medical Self-Help Films, U.S. Dept. H.E.W. & Dept. of Defense, 1967.

1. "Shock"
2. "Bleeding and Bandaging"

35 mm Filmstrip/Cassettes:

Series: First Aid As It Happens, Eye Gate House, Inc., Jamaica, N.Y., 1971.

1. "Artificial Respiration" #X-228-C.
2. "Poisonings, Burns, and Injuries to Bones" #X-228-D.

Principal Author(s): D. Ensrud, P. Myers

Equipment

1. Practoplast burn examples.
2. Projector, 16 mm.
3. Projector, 35 mm cassette/filmstrip player.
4. Resusci-Anne.
5. Sample First Aid Kit.

GENERAL INSTRUCTIONS:

Read the cover sheet for each prescribed LAP and follow the directions on each procedure step. Mark the time it takes you to complete each LAP on the SPR. If you do not understand what to do after reading the procedure steps, consult your instructor.

PERFORMANCE ACTIVITIES:

.01 Definition, Responsibilities and General Directions of First Aid
.02 Recognizing and Treating Shock
.03 GAP: Shock
.04 Artificial Respiration
.05 GAP: Artificial Respiration
.06 Kinds and Treatment of Burns
.07 Kinds and Treatment of Bleeding
.08 GAP: Bleeding
.09 Preventing Infection
.10 Head Injuries
.11 Nosebleeds
.12 Frostbite
.13 Poisonings by Ingestion
.14 GAP: Poisonings by Ingestion
.15 First Aid Supplies

EVALUATION PROCEDURE:

Complete the post test in each LAP as you finish it.

FOLLOW-THROUGH:

Go to the first assigned LAP.

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Glasgow AFB, Montana 59231

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Definition, Responsibilities and General Directions of First Aid

OBJECTIVE:

Recognize the definitions of first aid and your responsibilities in applying "general directions" to be used.

EVALUATION PROCEDURE:

Eight correct responses to a ten-item multiple-choice objective test.

RESOURCES:

Information Sheets: "Responsibilities of the First Aider"
"Definitions and General Directions of First Aid"

PROCEDURE:

1. Read information sheets: "Responsibilities of the First Aider" and "Definitions and General Directions of First Aid."
2. Complete study guide.
3. Complete LAP test with 80% score.

Principal Author(s): P. Myers

INFORMATION SHEET

"DEFINITIONS" & "GENERAL DIRECTIONS OF FIRST AID"*

First Aid is defined as the "immediate and temporary care given the victim of an accident or sudden illness until the services of a physician can be obtained.

General Directions For First Aid

1. Give urgently necessary first aid.

   This would include acting quickly in cases of severe breathing, stoppage of breathing, poisoning.

2. Keep the victim lying down.

   Don't overheat the patient but keep the person's temperature from falling. Place blankets underneath when possible as well as over the person.

3. Check for injuries.

   The extent of the exam for injuries should be guided by the kind of accident and the needs of the situation. Always consider a possible head or back injury.

4. Plan what to do.

   One of your first duties is to get a physician or ambulance or obtain medical advice by telephone.

5. Carry out the indicated First Aid.

   First, stop profuse bleeding and determine whether artificial respiration is needed. Don't use second best methods of first aid. Know what you're doing with the person temporarily entrusted in your care.

*(Adapted from First Aid, American Red Cross, Doubleday & Company, Inc., Garden City, N. Y., 1973, pp. 1-8.)

INFORMATION SHEET: RESPONSIBILITIES OF FIRST AIDERS

First aid is the giving of immediate and temporary care to a person injured in an accident or to a person suddenly becoming ill until the services of a physician can be obtained. Therefore, understanding the responsibilities of a first aider is necessary.

First, practice the Golden Rule -- "Do unto others as you would have done unto you." Ask yourself, "Would I stop and administer first aid if I were first on the scene of an accident?" (Is this my responsibility or my neighbor's?) The answer should be yes.

You are responsible to determine as best you can the severity and extent of injuries or illness.

You are responsible to apply direct pressure to a wound to stop or slow down severe bleeding.

You are responsible to adminster mouth to mouth artificial respiration in rare cases where breathing was stopped.

You are responsible to keep a person immobile (hold his head still if needed) if you suspect broken bones.

And, finally, you are responsible <u>not</u> to move an injured person unless he is in <u>immediate</u> danger.

These responsibilities of a first aider, not only apply in accident situations but in emergency illnesses that appear suddenly in your home.

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Glasgow AFB, Montana 59231

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Recognizing and Treating Shock

OBJECTIVE:

Recognize symptoms and identify appropriate treatment of shock.

EVALUATION PROCEDURE:

Eight correct responses to a ten-item multiple-choice objective test.

RESOURCES:

Medical Self Help Film: "Shock"
Projector, 16 mm
Information Sheet: "Shock"

PROCEDURE:

1. Watch filmstrip "Shock."
2. Read information sheet: "Shock."
3. Complete study guide.
4. Complete LAP test with 80% score.

Principal Author(s): P. Myers

INFORMATION SHEET

SHOCK *

Shock is a word that can mean many things. For example: electrical shock, insulin shock, anaphylactic shock and traumatic shock. This LAP deals with shock resulting in a condition in which the blood does not circulate properly and the person cannot function properly.

This kind of shock may develop after an accident, bleeding, burns, fractures, bullet wounds, severe infections or emotional upsets. Shock in one degree or another results after any injury but especially in burns, fractures and severe bleeding. Severe shock can cause death.

Whatever the cause of shock, from failure of the blood to circulate, the symptoms and treatment are the same:

Symptoms

* Weakness
* Cold, pale, clammy skin with beads of perspiration on forehead and palms.
* Rapid, weak pulse

Chills
Irregular, shallow breathing
Nausea
Vacant, dull eyes with dilated pupils
Unconsciousness and death are possible

* The most common symptoms

Treatment

Keep person lying down - to conserve strength and reduce heart's work load.

Elevate feet and legs - to help the return of blood to the heart except in case of chest or head injury.

Conserve body heat - avoid chilling or overheating. Put something underneath as well as over the person.

Keep person quiet - avoid unnecessary or upsetting conversation in order to conserve strength.

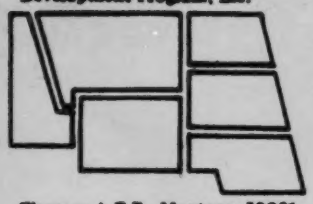
Administer water cautiously - never give fluids:

- if person is nauseated
- there is an abdominal wound
- person is unconscious
- you are in doubt about it

Transport person carefully, avoiding excitement and unnecessary changes in position.

*(Adapted from First Aid, B. Haller Igel, Behavioral Research Laboratories,

Mountain-Plains Education & Economic Development Program, Inc.



Glasgow A.F.B., Montana 59231

File Code: 51.01.02.03.A2-4

Date Published: 6-5-74

Group Activity Package

Student: _____

Date: _____

TITLE: Shock

OBJECTIVE:

As a result of group interaction, you will be provided with the opportunity to share ideas and opinions with others. The instructor may reinforce content of the LAPs. A change in learning methods will provide variety to independent study.

EVALUATION PROCEDURE:

Pending

PREREQUISITES:

Complete LAPs on Recognizing and Treating Shock

RESOURCES:

Writing materials
Surroundings favorable to group discussion

PROCEDURE:

Steps

1. Sign up for discussion group to be held at a mutually convenient time.
2. Introduction of topic "Recognizing and Treating Shock" by instructor.
3. Group interaction.
4. Summary.
5. Evaluation.

Principal Author(s): P. Myers

File Code: 51.01.02.04.A2-0

Date Published: 8/19/75

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Artificial Respiration

OBJECTIVE:

Recognize conditions needing artificial respiration and be able to demonstrate the process.

EVALUATION PROCEDURE:

Eight correct responses to a ten-item multiple-choice objective test.

RESOURCES:

Information Sheets: "Artificial Respiration"
"Rescue Breathing"
Resusci-Anne
Filmstrip: "Artificial Respiration"
35 mm filmstrip/cassette player

PROCEDURE:

1. View filmstrip on "Artificial Respiration."
2. Read information sheet.
3. Read booklet "Rescue Breathing."
4. Complete study guide.
5. Demonstrate process of artificial respiration on Resusci-Anne.
6. Complete LAP test with 80% score.

Principal Author(s): P. Myers

INFORMATION SHEET:
ARTIFICIAL RESPIRATION

The body needs a continuous supply of oxygen to live. That means the body cannot store oxygen for future use. If oxygen is not taken in continuously, there can be permanent brain damage after about 5 minutes and death usually results after 6 minutes. Since it is often difficult to know exactly when breathing stopped (and therefore oxygen not taken into the body), artificial respiration must begin as soon as possible.

Some of the conditions which cause breathing to stop are:

1. Electric shock
2. Drowning
3. Gas poisoning
4. Drug overdose
5. Accidents causing compression of the chest.
6. Blockage of the breathing passages, choking and strangulation.
7. Certain diseases such as polio.

If you suspect someone has stopped breathing, you should make a quick check to see for sure. This check should not take more than 10 seconds. Remember every second counts in this emergency: The quick check for breathing steps are:

1. Watch the abdomen, nose or chest for breathing movements or
2. Hold your ear or hand close to the persons nose or mouth to see if you feel the air.

If you do not feel the air or see breathing movements, the person is not breathing and artificial respiration must begin Immediately.

BREATHING

Fig. 1

Fig. 2

Fig. 3

When it stops from any cause, start mouth-to-mouth breathing at once. If possible, have someone else call a doctor. Place victim on back, If there's anything in the victim's mouth, turn head to side and quickly wipe it out with your fingers (Figure 1).

PROCEED AS FOLLOWS:

(1) Straighten victim's head and tilt back so chin points up (Figure 2). Push jaw up into jutting out position to keep tongue from blocking air passage (Figures 2 & 3).
(2) Place your mouth tightly over victim's and pinch nostrils shut (Figure 3). For a child, cover both nose and mouth tightly with your mouth.
(3) Breathe into victim's mouth or nose until chest rises.
(4) Remove your mouth. Listen for sound of returning air. If you don't hear it, recheck jaw and head position (Figure 2). If there's still no sound of breathing, turn victim on side and slap on back - gently, if a child - between shoulders. Recheck mouth for foreign matter.
(5) Repeat breathing, removing mouth each time to allow escape of air.

FOR ADULT: breathe forcefully into his mouth - 12 breaths a minute.
FOR CHILD: breathe gently - 20 a minute. Above all don't give up.

From Johnson and Johnson First Aid Wall Chart

Mountain-Plains Education & Economic Development Program, Inc.

Glasgow A.F.B., Montana 59231

File Code: 51.01.02.05.A2-4

Date Published: 6-5-74

Group Activity Package

Student: _____

Date: _____

TITLE: Articificial Respiration

OBJECTIVE:

As a result of group interaction, you will be provided with the opportunity to share ideas and opinions with others. The instructor may reinforce contents of the LAPs. A change in learning methods will provide variety to independent study.

EVALUATION PROCEDURE:

Pending

PREREQUISITES:

Complete LAP on Artificial Respiration

RESOURCES:

Writing material
Surroundings favorable for group discussion

PROCEDURE:

Steps

1. Sign up for discussion group to be held at a mutually convenient time.
2. Introduction of topic "Artificial Respiration" by instructor.
3. Group interaction.
4. Summary.
5. Evaluation.

Principal Author(s): P. Myers

File Code: 51.01.02.06.A2-0

Date Published: 8/19/75

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Kinds and Treatment of Burns

OBJECTIVE:

Identify and prescribe treatment for different kinds of burns.

EVALUATION PROCEDURE:

Eight correct responses to a ten-item multiple-choice objective test.

RESOURCES:

Information Sheets: "Kinds of Burns"
"Treatment of Burns"
"Treatment of Serious Burns"

PROCEDURE:

1. Read information sheets "Kinds of Burns," "Treatment of Burns" and "Treatment of Serious Burns."
2. Complete study guide questions.
3. Complete LAP test with 80% score.

Principal Author(s): P. Myers

INFORMATION SHEET

Kinds of Burns*

Burns are classified according to their severity. A first degree burn is the least severe burn. A third degree burn is the most severe.

In a first degree burn the skin reddens but there are no blisters. A sunburn in which the skin becomes very red is an example of a 1st degree burn.

In a second degree burn the skin becomes blistered. If a sunburn was severe enough that blisters developed, this would be an example of a second degree burn.

A third degree burn is the most severe type of burn. In third degree burns the burn is very deep and the skin is destroyed. They always require medical attention.

*(Adapted from First Aid, B. Haller Igel, Behavioral Research Laboratories, Palo Alto, 1972, frames 344-354.)

Information Sheet
Treatment of Burns

There are two main things to remember when you are going to take care of any burn:

1. Relieving Pain
2. Prevent Infection

All burns are painful because the heat causes damage to the skin and nerves. The pain is most safely relieved by putting the burned area in cold water. By cooling the burned area, the pain will be lessened and the degrees of damage may be lessened. For example, by immediately cooling the burn area, what may have been a second degree burn could end up as a first degree burn. Therefore, the first thing to do when a burn has occured is lower the skin temperature. This can be done by running cold water over the burn area, putting the burn area in a container of cold water, or apply a cold cloth to the area.

Once the skin temperature has been lowered, pain from a burn can be relieved by keeping air from the burn. Several layers of sterile gauze can be used to cover the burned area to keep the air out. Four to six layers of gauze is needed to cover the area. If sterile dressings are not available, use then a freshly ironed clean cloth. Each home should have sterile gauze in the first aid kit.

The use of a sterile dressing also prevents the area from becoming dirty. Any injury which causes a break in the skin that allows germs to enter has the possibility of becoming infected. The danger of infection is greatest among second and third degree burns. When a burn first happens, it may be difficult to tell what degree burn it is. Sometimes burns appear less serious at first than they actually are. Therefore precautions to prevent infection should be taken with all burns. Your hands should be washed well with soap and water before touching the burn. The dressing over the burn should be sterile and kept clean.

A second degree burn over a large part of the body and any third degree burn are considered serious burns. Medical care is necessary because of the dangers of shock and infections in serious burns. In these cases, it is most important to prevent shock and contamination which could lead to infections later.

The clothing of the injured person should be removed from burned part or cut away from the burned area. In a severe burn, pieces of clothing may stick to the burn. Do not try to pull the clothing off or pick off the pieces of cloth that may stick to the burn. Place a sterile dressing over the burned area and the pieces will be removed by the doctor. Your hands should be as clean as possible before touching the burn area. Clean hands and a sterile dressing will help to prevent a later infection.

Treatment of Serious Burns

Shock is always a danger in any injury which involves a great deal of pain or a large area of the body. Keeping the person warm, elevating the feet, reassurance and fluids can help prevent shock in a serious burn.

Serious burns require medical attention. Once the temperature of the burn areas has been lowered - either by smothering the flames out with a blanket or water and the area covered with the cleanest cloth possible, transport to the nearest medical facility for further treatment.

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Date Published: 8/19/75

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Kinds and Treatment of Bleeding

OBJECTIVE:

Identify and prescribe treatment for different kinds of bleeding.

EVALUATION PROCEDURE:

Eight correct responses to a ten-item multiple-choice objective test.

RESOURCES:

16 mm Film: "Bleeding & Bandaging"
Information Sheets: "Kinds of Bleeding"
"Treatment of Bleeding"
"Tourniquet"
Projector, 16 mm

PROCEDURE:

1. View film "Bleeding & Bandaging."
2. Read information sheets: "Kinds of Bleeding," "Treatment of Bleeding" and "Tourniquet."
3. Complete study guides.
4. Complete LAP test with 80% score.

Principal Author(s): P. Myers

INFORMATION SHEET: KINDS OF BLEEDING

KINDS OF BLEEDING

In case of severe bleeding immediate and proper care can save lives. While minor cuts and wounds are usually not too serious, injuries which cause severe bleeding from major blood vessels in the body are extremely dangerous. A person may bleed to death in a short time if nothing is done to stop bleeding from a large artery. In addition, a slow but steady loss of blood over a period of time can also be dangerous. The average adult has about 6 quarts of blood in the body. The loss of one quart is serious, especially if it happens very quickly. A child has 3 quarts of blood and the loss of one pint is serious. Loss of more blood than this could be fatal. Loss of smaller amounts may produce weakness and shock.

There are several types of bleeding. Bleeding can occur where veins or arteries are cut or when the capillaries lying in and below the skin are ruptured.

ARTERIAL BLEEDING

Arteries are the blood vessels that carry the blood away from the heart. When an artery has been cut, blood comes out in SPURTS. It spurts because it is coming directly from the heart which is pumping the blood continually. Blood from an artery tends to have a bright red color.

VENOUS BLEEDING

Veins are the blood vessels that carry the blood back to the heart. Because the pressure is lower in veins, blood comes out more evenly and is usually more easily controlled. Blood from veins is usually darker in color than blood from arteries.

CAPILLARY BLEEDING

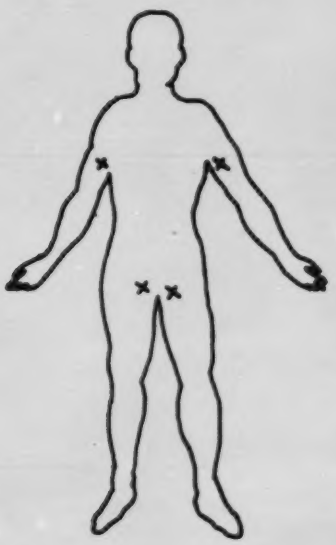
Capillaries are the smallest blood vessels. They form a connecting network between the arteries and veins all over the body. Bleeding from capillaries is usually easy to control by slight pressure over the wound. Bleeding from the capillaries oozes out.

INFORMATION SHEET: TREATMENT OF BLEEDING

The first step in controlling bleeding is to apply DIRECT PRESSURE over the wound. Direct pressure over a wound is the simplest way to control bleeding. Most external bleeding can be controlled by using direct pressure. If no cloth is available, the bare hand can be used. A sterile cloth is best, but use the cleanest material you can find. Use direct, firm hand pressure from the beginning rather than starting with gentle pressure and slowly increasing it. If the wound is on an arm or leg, the wounded limb should be RAISED. In this position the blood does not flow into the wounded limb so fast and the bleeding is slowed. Most bleeding can be controlled in 5-10 minutes with direct pressure. The pressure should be continued until the bleeding stops - this may take up to half an hour. If blood soaks through the cloth you are using, DO NOT remove it. Apply more cloth and when bleeding has stopped, put a bandage around it to hold it in place. Be careful not to make the bandage too tight.

If direct pressure and elevation do not stop the bleeding it will be necessary to use the second step in controlling bleeding -- PRESSURE POINT. This is used in addition to the direct pressure method. The fingers are pressed directly against the blood vessel which is bringing blood to the area where the wound is located. The pressure is applied by pressing the blood vessel against the underlying bone. There are four points on the body where pressure against the blood vessel supplying the part would be of use:

1. For a wound on the arm press against the inside of the upper arm.
2. For a wound on the leg press the inside, the thigh, just below the groin.



First - direct pressure with elevation of the limb

Second - pressure on vessel bringing blood - called pressure point

INFORMATION SHEET: TOURNIQUET

A torniquet is one of the most successful means of controlling bleeding from a large artery in an arm or leg. HOWEVER, because it is dangerous, it is used only as a last resort.

WARNING

A torniquet is only used when all other methods on controlling bleeding fail (elevate limb, direct pressure, pressure point). If the injury is severe enough to require a tourniquet, surgery will probably be necessary to repair the damaged vessels. A tourniquet should be used only for severe, life threatening bleeding that cannot be controlled by any other means.

Materials that can be used as tourniquets include:

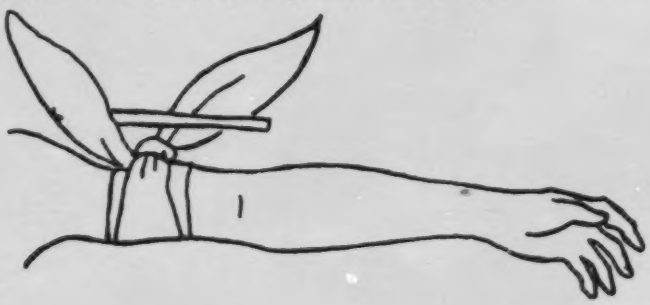
1. Purchased tourniquets are made of either rubber or heavily braided materials.

2. Imporvised tourniquets
   a. rubber tubing
   b. large folded handkerchief
   c. necktie
   d. leather strap
   e. strips torn from sheet or material.

In all cases, the tourniquet must be wide enough not to cut the skin and pressure must never be made on nerve trunks. It is applied between the wound and the heart, but as low as possible, about 1" on the arm or leg. Always pin a note telling the location of the tourniquet and the time it was put on.

How to Use a Tourniquet

Wrap a strong, wide piece of cloth (such as a handkerchief or necktie) twice around the arm or leg and tie a half knot. Place a short stick (or similar object such as a ruler) on the half knot and



tie a square knot.

File Code: 51.01.02.09.A2-0

Date Published: 11-07-74

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Preventing Infection

OBJECTIVE:

Identify types of wounds prone to infection and be able to prescribe initial prevention measures.

EVALUATION PROCEDURE:

Eight correct responses to a ten-item multiple-choice objective test.

RESOURCES:

Information Sheets: "Preventing Infection"
"Cuts and Scratches"

PROCEDURE:

1. **Read information sheets: "Preventing Infection" and "Cuts and Scratches."**
2. Complete study guide.
3. Complete LAP test with 80% score.

Principal Author(s): P. Myers

INFORMATION SHEET

Preventing Infection*

Minor wounds such as small cuts and scratches require proper first aid just as a broken bone or a burn does. A wound is an injury in which the skin is broken. There is always the danger of infection.

Infection is caused by germs entering the wound. The first thing to do in an injury where the skin has been broken is to clean the area with soap and running water. Then the wound should be covered with a sterile dressing to keep the wound clean. A sterile dressing is one that's free from germs. When you apply a sterile dressing, be careful not to handle that part of the dressing that goes directly over the wound.

After the dressing is applied, a bandage is used to hold the dressing in place. Adhesive tape or another kind of bandage can be used.

Some authorities recommend applying an antiseptic to a wound. Antiseptics are preparations that stop the growth of germs. Mild antiseptics may be helpful, but strong antiseptics can be harmful. Your doctor is the best person to advise you on the use of an antiseptic.

Cuts and Scratches*

Soap and pure water is the best treatment for cuts and scratches.

1. Wash the area with soap and water using absorbent cotton or a clean cloth. (If you have hydrogen peroxide, use it to wash out the cut or scratch).
2. Bacitracin may be applied, but washing it well is really the only treatment necessary.
3. You can cover it with a bandage for the purpose of keeping it clean.

If the cut is large or gapping then stitches may be necessary and the child should be taken to the hospital clinic. This is only an emergency situation if the bleeding isn't able to be controlled by pressure and closing the wound is needed. If a child has a large cut which requires stitches and it happened at night when no immediate help was available (such as hospital or doctor service), the cut can be cleaned and closed with a pressure bandage and the child taken to a doctor in the morning for stitches. A doctor may recommend a tetanus toxoid booster shot especially for deep wounds or puncture wounds.

*(Adapted from First Aid, B. Haller Igel, Behavioral Research Laboratories, Palo Alto, 1973.)

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

File Code: 51.01.02.10.A2-0
Date Published: 10/16/75

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Head Injuries

OBJECTIVE:

Recognize symptoms to watch for after a head injury and be able to recognize if they are severe enough to warrant professional medical attention.

EVALUATION PROCEDURE:

Eight correct responses to a ten-item multiple-choice objective test.

RESOURCES:

Information Sheet: "Head Injuries"

PROCEDURE:

1. Read information sheet on "Head Injuries".
2. Complete study guide.
3. Complete LAP test with 80% score.

Principal Author(s): P. Myers

HEAD INJURIES

A fall on the head is a common injury from the age when a baby can roll over and thereafter fall off a bed, to when an adult falls down the stairs.

It is obvious if an infant or small child falls and receives a large cut that requires stitches, he should have immediate attention.

What can you do before you are able to see a Doctor?

1. First, don't "panic". Apply a washcloth against the wound creating pressure to control bleeding.
2. When bleeding is controlled, place ice against wound (or cold water on clean cloth).
3. Keep the child quiet - your anxieties can excite the child needlessly.

For the child or adult that receives a bump without skin break from a fall, immediate care of a doctor is not needed but these symptoms must be watched for at least 24 hours after head injuries occur:

1. If he starts vomiting.
2. If he becomes pale for a number of hours.
3. If he shows signs of headache.
4. If he falls asleep easily (but is able to be aroused).
5. If he becomes unconscious.
6. If a child has a seizure or fit.
7. If he develops difficulty in walking.
8. If he develops weakness in arm or leg.
9. If he develops double vision or loses vision.
10. If he has bleeding from the ears.

Then a child should see the doctor for examination and X-rays. (If a child loses consciousness either right after the fall or later, immediate doctor's care is needed).

PRECAUTION

If the fall happens late at night and the child is sleepy because of late hours, allow him to go to sleep and set your alarm for 2 hours and arouse the child. If he can be aroused, no concern is needed. Then let him go back to sleep.

The swelling that puffs out quickly on a child's skull after a fall doesn't mean anything serious in itself if there are no other symptoms mentioned above. This bump is caused by a broken vessel just under the skin.

File Code: 51.01.02.11.A2-0

Date Published: 10/16/75

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Nosebleeds

OBJECTIVE:

Identify treatment of nosebleeds and determine severity to warrant medical attention.

EVALUATION PROCEDURE:

Eight correct responses to a ten-item multiple-choice objective test.

RESOURCES:

Information Sheet: "Nosebleeds"

PROCEDURE:

1. Read information sheet on "Nosebleeds".
2. Complete study guide.
3. Complete LAP test with 80% score.

Principal Author(s): P. Myers

NOSEBLEEDS*

Nosebleeds can result from an injury or for no apparent reason. Nosebleeds can also be caused by hypertension (high blood pressure).

When a nosebleed occurs, the first thing to do is to sit quietly, then tilt your head back and pinch your nostrils together for a few minutes. This applies pressure which will help to stop the bleeding. A cold wet cloth applied to your nose and face will also help to stop the bleeding. When you have a nosebleed, do not blow your nose. This will only cause more bleeding. If you can't stop a nosebleed by pressing the nostrils together and using cold cloths in a reasonable length of time, 5 - 10 minutes, a doctor should be consulted.

In a dry climate a humidifier or vaporizer helps to prevent nosebleeds that occur for no apparent reason.

*(Adapted from First Aid, B. Haller Igel, Behavioral Research Laboratories, Palo Alto, 1972.)

File Code: 51.01.02.12.A2-0

Date Published: 11-07-74

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Frostbite

OBJECTIVE:

Recognize when frostbite is apt to occur, its treatment and prevention.

EVALUATION PROCEDURE:

Eight correct responses to a ten-item multiple-choice objective test.

RESOURCES:

Information Sheet: "Frostbite"

PROCEDURE:

1. Read information sheet on "Frostbite".
2. Complete study guide.
3. Complete LAP test with 80% score.

Principal Author(s): P. Myers

FROSTBITE

Frostbite is damage to the tissues resulting from exposure to extreme cold, especially when there is a strong wind. Frostbite seldom occurs with a temperature above 20 degrees.

Signs of Frostbite

Frostbite is first manifested by contraction of the blood vessels in the skin, thus giving a very pale appearance. In severe cases of frostbite, the blood does not come back to the skin.

Treatment

1. Most effective treatment of freezing is rapid rewarming.
2. Warm water (not hot enough to "scald").
3. If fingers are affected, put into armpits.

Prevention

Postpone outdoor work when temperature is below 8 degrees, particularly when there is a strong wind.

Wear clothing, shoes, socks, and gloves that are well-fitted and hold warmth.

Don't plan long trips in extreme weather months.

Don't allow your clothing to become damp when below zero temperatures.

Precautions

If you do have to remain outdoors during cold weather, do not stay out longer than 2 hours at a time.

People with damaged circulation or with diabetes are more likely to suffer serious damage from frostbite so they particularly should avoid being outdoors in extreme weather conditions.

File Code: 51.01.02.13.A2-0

Date Published: 8/19/75

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Poisoning by Ingestion

OBJECTIVE:

Identify conditions under which poisonings occur, recognize preventive measures and be able to give initial treatment to poisoning victims.

EVALUATION PROCEDURE:

Eight correct responses to a ten-item multiple-choice objective test.

RESOURCES:

First Aid, American Red Cross.
Information Sheets: "Poisonings by Ingestion"
"Rules for Taking and Storing Medications"
"Treatment - Poisonings"
Filmstrip/cassette: "Poisoning, Burns and Injuries to Bones" #X-228-D
35 mm filmstrip/cassette player

PROCEDURE:

1. View filmstrip "Poisoning, Burns and Injuries to Bones."
2. Obtain First Aid and read pages 48-50.
3. Read information sheets.
4. Complete study guides.
5. Complete LAP test with 80% score.

Principal Author(s): P. Myers

INFORMATION SHEET: POISONING BY INGESTION*

Most accidental poisonings take place in the home. Most poison victims are children. It may surprise you to know that most poisonings in children happen while the child is under supervision of an adult -- usually the parent. This means to prevent poisonings, additional steps by parents have to be taken. Each home should be "Poison-Proof"; perhaps you think your house is safe. Let's take every room in your house and see if your house is "Poison-Proof".

KITCHEN - More poisonings occur in the kitchen than in any other room in the house. To be poison-proof, all dangerous household agents should be kept separate from food. Household agents are often stored under the sink or on low shelves where children can get to them. Some common poisonous household agents are: Soaps, detergents, ammonia, furniture polish, and drain cleaners. Poisonous agents should be stored in the original container, properly labeled and out of the reach of children. Such agents should also be stored separate from edible items. In the hurry of meal preparation, one might pick up a poison instead of a flavoring, or boric acid instead of sugar.

BEDROOM - Does it surprise you that many poisonings happen in the bedroom? Poisonous items often stored in the bedroom are mothballs, cosmetics, cleaning agents, sleeping pills and other medicines. To "poison-proof" the bedroom, keep all poisonous items in their proper container and store in places where children can't get them. Medicines should not be reached "conveniently" by a person too sleepy to know what he is doing.

BATHROOM - Poisonous items often kept in the bathroom are first aid supplies, medicines and non-medical materials. Examples of non-medical materials which are poisonous are toilet bowl cleaners, hair solutions, deodorants, nail polish, shaving lotion. Medicine should be stored away from all other items. If such items are able to be reached by your children, your bathroom isn't "Poison-Proof".

*(Adapted from First Aid, American Red Cross, 4th ed., 1973.)

Page 2 INFORMATION SHEET (continued)
Poisoning by Ingestion

LIVING ROOM - Often poisonings occur here when poisonous items are left out after use. Examples of such items are cosmetics, cleaning agents and medicines. To Poison-Proof the living room, put poisonous items back where they belong after using them. Don't let these items accumulate in the living room -- they don't belong there.

GARAGE AND YARD - Many poisonous items are kept here that are used around the car, house and yard. Poison-Proof this area by keeping all such items in plainly labeled containers and stored out of the reach of children. Paints, varnishes, solvents (turpentine), waxes and polishes are sometimes stored in soft drink bottles. People have tried to refresh themselves with what looked like soft drink, but turned out to be poison. Chemicals used on the yard or garden can get into the mouth by being mistaken for something else or from soiled hands while smoking or drinking. They can also be absorbed through the skin.

REMEMBER

1. Children will eat and drink almost anything, therefore KEEP ALL POISONS OUT OF REACH AND SIGHT; preferably in a locked cabinet or container. Even if you must leave the room for only an instant, move the container to a safe place.

2. Return poisons to proper storage IMMEDIATELY after use.

3. Keep all products in their original container and be sure they are properly labeled. Read the label before using any product and follow the directions carefully. The instructions have been written for your protection.

4. DESTROY OLD PRODUCTS by pouring contents down drain or toilet-rinse container before discarding. Don't put a poisonous container with its contents in it, in the garbage can where children or animals can find it. This means clean out the medicine cabinet periodically.

5. Keep foods and household products SEPARATED.

RULES FOR TAKING AND STORING MEDICATIONS

1. NEVER take a medication in the dark.
2. ALWAYS read the directions carefully BEFORE taking a medication.
3. NEVER increase or decrease the dosage of a medication nor take a medication more frequently than directed without asking your physician.
4. ALWAYS take a medication as directed unless otherwise directed by your physician or pharmacist.
5. Pour from a medication bottle with the label upward. This keeps the label clean and easy to read.
6. Shake a liquid medication thoroughly, if so directed.
7. Keep a medication in the refrigerator, but do not freeze, if so directed.
8. ALWAYS discard your medication properly after an indicated period of time if so directed.
9. NEVER take a medication originally prescribed or intended for others.
10. ALWAYS keep all household chemicals and all medications out of reach of children.
11. ALWAYS close a medication container at once. Some medications get stronger, others weaker, if container is left open.
12. NEVER interchange a medication from one container to another container bearing directions regarding use. Dangerous results may occur.
13. NEVER pour a medication back into the bottle as it may contaminate the preparation.
14. ALWAYS consult with your physician or pharmacist about questions concerning a medication.

TREATMENT - POISONS

In all cases of poisoning, it is important to get the poison out or to dilute the poison. REMEMBER - if anyone swallows poison, it is an emergency. Any non-food substance is a potential poison. Speed is the most important thing if poisoning is suspected.

1. Dilute the poison - give a glass of water or milk to persons who are conscious. Up to one quart can be given to adults.

2. Call the Doctor, Police, Hospital or Poison Control Center - it is better to have someone else do this while you are diluting the poison.

3. Find the suspected poison - save the container and the rest of its contents for the doctor. Follow the directions on the container or advice of doctor if it has been received.

4. Transport to medical facility.

THIS IS ALL YOU DO IF THE POISON IS:

-----A PETROLEUM PRODUCT (cleaning fluids, furniture polish, gasoline, Kerosene, Benzene, Naphtha).
-----A STRONG ACID (hydrochloric, nitric, sulphuric-battery acid).
-----A STRONG ALKALI (drain-pipe cleaner, some washing powders, and some paint removers, Ammonia).

Do not induce vomiting in these cases as more damage can be done to the person by the product as it comes back up. These products damage the membranes of the mouth and throat.

If the poison was not

-----A petroleum product, strong acid or strong alkali
-----And the person is conscious and has not convulsed.

The next thing to do is

5. Try to induce vomiting - this can be done by pressing gently on the back of the person's tongue with your fingers or a spoon handle. The person should be facing downward, with the head lowered to keep the vomit from entering the lungs. The drug IPECAC can be used to induce vomiting. Ipecac is sold without a prescription in pharmacies in one ounce bottles. One Tablespoon (½ ounce) of

Ipecac for a person over age one and at least one glass of water is the dosage. Vomiting usually occurs within 20 minutes. One tablespoon of EITHER table salt, baking soda, or dry mustard for each glass of water could also be used to make someone vomit.

6. Transport the person to a medical facility with the poison container. Do not waste time waiting for vomiting. Certain poisons have specific antidotes or treatments to counteract the effect. These items are described in the Red Cross First Aid Textbook. Many times the poison container label will tell the antidote. Special items are available from the pharmacy. An antidote is a substance such as vinegar, baking soda, milk, eggs, etc. The doctor or poison control center will know the composition of poisonous substances and prescribe an antidote.

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow A.F.B., Montana 59231

File Code: 51.01.02.14.A2-4

Date Published: 6-5-74

Group Activity Package

Student: _____

Date: _____

TITLE: Poisoning by Ingestion

OBJECTIVE:

As a result of group interaction, you will be provided with the opportunity to share ideas and opinions with others. The instructor may reinforce contents of the LAPs. A change in learning methods will provide variety to independent study.

EVALUATION PROCEDURE:

Pending

PREREQUISITES:

Complete LAP on Poisonings by Ingestion

RESOURCES:

Writing material
Surroundings favorable for group discussion

PROCEDURE:

Steps

1. Sign up for discussion group to be held at a mutually convenient time.
2. Introduction of topic "Poisonings by Ingestion" by instructor.
3. Group interaction.
4. Summary.
5. Evaluation.

Principal Author(s): P. Myers

File Code: 51.01.02.15.A2-0

Date Published: 5/31/74

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: First Aid Supplies

OBJECTIVE:

Be able to recognize how to properly use and store first aid supplies.

EVALUATION PROCEDURE:

Eight correct responses to a ten-item multiple-choice test.

RESOURCES:

Sample First Aid Kit: Information Sheet - "First Aid Supplies and Their Use" - (Attached)

PROCEDURE:

1. Read the information sheet "First Aid Supplies and Their Use."
2. Complete the study guide.
3. Complete the LAP test with a score of 80%.

Principal Author(s): D. Ensrud

Information Sheet
FIRST AID SUPPLIES AND THEIR USE

For you to know what First Aid supplies you need to keep on hand in your home, you first need to consider what are the individual needs of your family. Think of each member of your family, what are the existing health problems and what things would you need to have. These items will depend on known health problems and to an extent, the age of family members.

In addition to these special items, there is a basic list of First Aid Supplies which is recommended for all families to keep on hand. All items should be stored in a specific place hwere they can be found easily when needed in a hurry. All such items should be kept together - any large, clean covered container works well. A coffee can or plastic ice cream tub works well. The covered container should be stored out of the reach of children.

Many different items can be obtained to complete First Aid supplies. The following items are recommended as basic, or items that every family should have available.

	ITEM	USE
1.	Adhesive Bandages - available in various sizes and shapes	For minor cuts, scratches and abrasions.
2.	Antiseptic - available as a cream, liquid, or soap.	To clean any injury which breaks the skin.
3.	Sterile Gauze Pads - available in various sizes.	To cover large areas of skin breaks, abrasions and cuts or to be used as a compress to stop bleeding.
4.	Adhesive Tape - available in various widts.	To bind gauze or other dressings in place.
5.	Sterile Cotton Balls, available in various sizes.	Used for applying antiseptic and for cleaning skin breaks.
6.	Elastic Bandage - available in various sizes.	Used for support in case of sprains or other injuries.
7.	Thermometer, Oral	Used for adults and older children.
8.	Thermometer, Rectal	Used for infants and young children.
9.	Scissors, any size	To cut tape or bandages.
10.	Petroleum Jelly	Used as a lubricant for rectal thermometers

11.	First Aid Guide - one small enough to store in container.	Used for quick reference in case of an emergency
12.	Aspirin - available for adults and children.	Used in case of minor aches and pains and to relieve fever. Follow directions on the bottle.

Any medicines which are necessary for your family should be labeled clearly as to the name of the medicine, instructions and necessary warnings. All medicines should be stored out of the reach of children in a dry, cool place. The best storage temperature should be below 70 degrees, but they should not be frozen.

All medicines and First Aid supplies should be checked periodically. You should make replacements of items you use so that you won't be out of something when it is needed.

BASIC FIRST AID SUPPLIES

The following items should be on hand in EVERY home in order to handle accidents and ilness. Do you have these items?

1. Adhesive Bandages
2. Antiseptic
3. Adhesive Tape
4. Sterile Gauze Pads
5. Cotton Balls
6. Elastic Bandage
7. Thermometer - Oral for adults and older children
   Rectal for infants and young children
8. Scissors
9. First Aid Guide
10. Petroleum Jelly
11. Aspirin - Adult and children dosages

File Code: 51.02.01.00.A2-1

Date Published: 4/30/75

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Experience Guide

UNIT: MAJOR HEALTH PROBLEMS

RATIONALE:

This unit covers selected health problems of concern to today's families. These health problems can be prevented or the severity reduced by proper health practices and/or early recognition of symptoms.

OBJECTIVES:

Recognize the symptoms and health practices to prevent or lessen the severity of selected major health problems.

RESOURCES:

Printed Materials

Venereal Disease (pamphlet). American Medical Association.

Audio/Visuals

"Venereal Disease: A Present Danger" (Parts I and II). Guidance Associate Filmstrips, 1972.

Equipment

Projector, 35 mm

GENERAL INSTRUCTIONS:

Read the cover sheet for each prescribed LAP and follow the directions on each procedure step. Mark the time it has taken you to complete each LAP in the SPR. If you do not understand what to do after reading the procedure steps, consult your instructor.

Principal Author(s): D. Ensrud, P. Myers

PERFORMANCE ACTIVITIES:

.01 Introduction to Communicable Diseases
.02 Diseases Prevented by Immunization
.03 Strep and Staph Infection
.04 GAP: Communicable Diseases
.05 Venereal Disease
.06 GAP: Venereal Disease
.07 Heart Disease
.08 Cancer
.09 Diabetes

EVALUATION PROCEDURE:

Complete the post test for each LAP as you finish it.

FOLLOW-THROUGH:

Go to the first assigned LAP.

File Code: 51.02.01.01.A2-0

Date Published: 8/19/75

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Introduction to Communicable Diseases

OBJECTIVE:

Identify causes, characteristics, and conditions under which certain communicable diseases occur.

EVALUATION PROCEDURE:

Eight correct responses to a ten-item multiple-choice objective test.

RESOURCES:

Information Sheet: "Introduction to Communicable Diseases"

PROCEDURE:

1. Read information sheet: "Introduction to Communicable Diseases."
2. Complete study guide.
3. Complete combined LAP test with 80% accuracy after completing this LAP and LAP 51.02.01.02.

Principal Author(s): P. Myers

INTRODUCTION TO COMMUNICABLE DISEASES*

INFORMATION SHEET

A communicable disease is one that can be spread from one person to another. An example of a communicable disease is the common cold and the childhood diseases such as measles, mumps and chickenpox. Some communicable diseases are spread directly from person to person. Insects and animals can also spread diseases, for example, malaria is spread by a mosquito. The mosquito bites a person who is infected with malaria and them bites a healthy person and gives them the disease.

Communicable diseases are caused by tiny living things called microorganisms. They are so small they can be seen only through a microscope. They are commonly called germs. Germs are disease-producing microorganisms.

During the 19th century scientists and health workers believed that dirt and filth caused disease. It is not the dirt and filth themselves that cause disease but the microorganisms that live and grow in unsanitary conditions. People became aware of microorganisms in 1687 with the invention of the microscope. They are the smallest known forms of life.

One group of microorganisms are called bacteria. Bacteria are one-celled plants. Some are useful and some cause disease. Bacteria are divided into three (3) groups.

Rod-shaped bacteria is called BACILLI.

Round bacteria are called COCCI.

Spiral shaped microorganisms are called SPIRILLA.
Note: spiral-shaped bacteria are less common than rod-shaped or round.

*(Adapted from Prevention of Communicable Disease, B. Haller Igel, Behavioral Research Laboratories, Palo Alto, 1972, frames 1-18 and 23-85.)

Twist the stick to tighten the tourniquet until the flow of blood stops.

Hold the stick in place with the end of the tourniquet or another strip of cloth.

Once a tourniquet is applied, the victim must be taken as soon as possible to a doctor. A tourniquet, once applied, should only be loosened or removed by a doctor in a hospital. Experience has shown this method is the safest way to deal with life-threatening bleeding.

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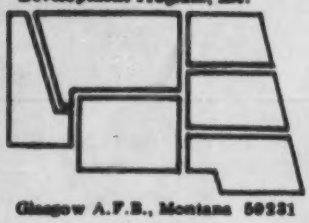


Glasgow A.F.B., Montana 59231

File Code: 51.01.02.08.A2-4

Date Published: 6-5-74

Group Activity Package

Student: _____

Date: _____

TITLE: Bleeding

OBJECTIVE:

As a result of group interaction, you will be provided with the opportunity to share ideas and opinions with others. The instructor may reinforce contents of the LAPs. A change in learning methods will provide variety to independent study.

EVALUATION PROCEDURE:

Appropriate responses to "Discussion Guide" attached.

PREREQUISITES:

Complete LAP on Kinds and Treatment of Bleeding

RESOURCES:

Writing material
Surroundings favorable for group discussion

PROCEDURE:

Steps

1. Sign up for discussion group to be held at a mutually convenient time.
2. Introduction of topic "Kinds and Treatment of Bleeding" by instructor.
3. Group interaction.
4. Summary.
5. Evaluation.

Principal Author(s): P. Myers

DISCUSSION GUIDE: BLEEDING

After completing the LAP "Kinds and Treatment of Bleeding" and viewing a film on bleeding, the following questions are used to stimulate discussion with the group.

1. When should a tourniquet be used?
2. Should you loosen a tourniquet every 15 minutes or leave it in place?
3. What is the most serious type of bleeding?
4. What is the first method used to try to stop bleeding? And then what method?
5. What type of bleeding indicates a serious head injury?
6. If a person is bleeding profusely and not breathing, would you give artificial respiration first or stop the bleeding?
7. If blood is spurting from a wound, would the bleeding come from a vein or an artery?
8. Do the arteries carry blood away from the heart or back to the heart?
9. What is the usual treatment for capillary bleeding?
10. Where are some pressure points that can be used to stop bleeding?

Bacteria are microscopic, one-celled plants. If growth conditions are favorable one of these organisms can multiply into millions in just a few hours. The human body is a good place for the growth of bacteria because it provides the heat, moisture and food bacteria needed for growth. The mouth, nose and throat are ideal places for the growth of bacteria.

Fungi is also a kind of microorganism. Fungi, like bacteria, are tiny plants. Just as there are bacteria that are helpful as well as harmful, there are helpful and harmful fungi.

Two kinds of fungi are yeasts and molds. Yeast is used in making breads. One type of mold is used to make penicillin. Fungi can also cause disease such as athletes foot and ringworm.

Another kind of microorganism is called a virus. Many of the most common communicable diseases are caused by viruses: colds, chickenpox, measles and polio to name a few.

Viruses are the smallest living things known. They are too small to be seen with an ordinary microscope, an electron microscope is needed. Viruses are so small they can enter and live inside bacteria.

The most frequently occurring communicable diseases are caused by viruses.

Bacteria, fungi and viruses are not the only microorganisms that cause disease, but they cause most of the common communicable diseases.

Microorganisms must gain entrance to the body before they can cause disease. Three common ways of entering the body are the mouth, nose and skin.

If you eat contaminated food or drink from a contaminated glass the microorganisms can enter your body through your mouth.

Microorganisms that live in the nose, throat, and lungs may be spread through the air by coughing or sneezing. These microorganisms may then be breathed in through the mouth or nose of an unsuspecting person.

Skin can also provide an entrance for microorganisms. Healthy unbroken skin protects us from disease-producing organisms but a cut, bite or break in the skin provides an entryway for microorganisms.

If disease producing microorganisms enter the body and are able to establish themselves so that they can live and multiply, they will cause an infection.

An infection is a condition caused by the growth of disease-producing microorganisms in the body. The time between the entrance of the organisms into the body and the first symptoms of disease is called the incubation period. The incubation period varies with different diseases.

File Code: 51.02.01.02.A2-0

Date Published: 8/19/75

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Diseases Prevented by Immunization

OBJECTIVE:

Recognize diseases prevented by immunizations.

EVALUATION PROCEDURE:

Eight correct responses to a ten-item multiple-choice objective test.

RESOURCES:

Information Sheet: "Diseases Preventable by Immunization"

PROCEDURE:

1. Read information sheet: "Diseases Preventable by Immunization."
2. Complete study guide.
3. Complete combined LAP test with 80% score after completing this LAP and LAP 51.02.01.01.

Principal Author(s): P. Myers

INFORMATION SHEET: DISEASES PREVENTABLE BY IMMUNIZATION *

The first artificial immunization developed was smallpox. This vaccination was discovered by Edward Jenner. He observed that people who worked with cows and were infected by a mild disease called cowpox didn't get smallpox. He began to innoculate people with cowpox and they didn't develop smallpox.

Vaccination for smallpox is usually done in infancy. A small amount of vaccine is introduced into the skin. Within a few days the area becomes red and swollen. This mild infection causes antibodies to be formed. The antibodies formed against the vaccination protect you against smallpox. Vaccinations should be repeated at intervals because they don't give lifetime immunity.

Diphtheria is another communicable disease that can be prevented by immunization. Diphtheria is caused by bacilli that are spread by droplet infection. As the bacilli multiply, swelling occurs and a tough membrane spreads over the infected area. The swelling and membrane can cause suffocation because they block the air passages. Not long ago epidemics of diphtheria were frequent and many children died. Now diphtheria can be prevented by immunization.

Diphtheria toxoid is used to stimulate the formation of antitoxins in the body, thereby producing an active immunity. Immunization against diphtheria lasts for several years. Gradually, the antibodies disappear from the blood. Immunity can be maintained with a booster injection.

A booster injection is a small amount of vaccine given to a person who already has some immunity. These injections are given to increase and continue the person's immunity. When a booster injection is given, more antibodies are formed and a high level of protection can be reached quickly. The test for immunity to diphtheria is called the Schick test.

Tetanus, or "lockjaw" as it is commonly called, is also caused by bacilli. Tetanus bacilli produce a powerful toxin that damages nerve tissue. It is characterized by violent muscle jerks. It is often fatal. Immunization against disease is very important. Immunization with toxoid is usually started in infancy and maintained with booster doses at intervals. Active immunity is acquired by immunization with tetanus toxoid. Antitoxin is given after a wound occurs for immediate but temporary immunity.

Whooping cough, pertussis, is another preventable disease. This disease causes violent attacks of coughing. It is called whooping cough because there is a characteristic whoop at the end of the cough. It is a highly contagious disease spread by droplet infection.

*(Adapted from Prevention of Communicable Disease, B. Haller Igel, Behavioral Research Laboratories, Palo Alto, 1972, frames 185-227.)

Whooping cough vaccine is usually given in infancy along with diphtheria and tetanus. This is called a DPT immunization.

Measles and poliomyelitis are both viruses that cause disease that are prevented by immunization. The virus that causes polio attacks the nervous system and damages or destroys nerve cells in the spinal cord. A severe attack of polio can cause permanent paralysis.

Dr. Jonas Salk developed a polio vaccine in 1952. In 1955 the Salk vaccine was proven safe and effective. Since then another vaccine has been developed so there are two vaccines available to protect against all types of polio.

RECOMMENDED SCHEDULE FOR IMMUNIZATION
(American Academy of Pediatrics)

AGE	IMMUNIZATION
6 - 8 weeks	first DPT (diphtheria, pertussis, tetanus) first OPV (oral polio vaccine)
3 - 4 months	second DPT second OPV
4 - 5 months	third DPT third OPV
1 year	MMR (the 2 measles and mumps)
18 months	DPT booster OPV booster
4 - 6 years	DPT booster OPV booster
14 - 16 years	DT - (adult diphtheria - tetanus)
thereafter	DT - every 10 years

File Code: 51.02.01.03.A2-0

Date Published: 11-06-74

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Strep and Staph Infection

OBJECTIVE:

Identify common terms, dangerous kinds and serious complications, treatment and prevention, and precautions to be observed with staph and strep.

EVALUATION PROCEDURE:

Eight correct responses to a ten-item multiple-choice objective test.

RESOURCES:

Information Sheet: "Strep and Staph Infection"

PROCEDURE:

Steps

1. Read information sheet "Strep and Staph Infection".
2. Complete study guide.
3. Complete LAP test with 80% score.

Principal Author(s): P. Meyers

INFORMATION SHEET: STREP AND STAPH INFECTION*

Infections are the cause of many health problems, especially in areas where people live close together, have poor medical care and do not take good care of themselves. For some reason, certain areas of the country seem to have more infections than others. Areas where people move in and out frequently also seem to have a large number of infections. Although infections can be caused by many kinds of bacteria, there are two kinds that are the most common. These are streptococcal infections.

Streptococcal Infections

These infections are usually just called "Strep". The most common strep infection is "strep throat" which affects the throat and nasal passages.

Kinds of Infection	-	Upper respiratory infections - sore throats. Commonly called pharyngitis or tonsillitis. Streptococcal bacteria are divided into several groups; the kind known as Group A is more serious and requires more careful treatment than other kinds. Group A strep can be the cause of other more serious diseases.
Symptoms	-	Sudden onset of sore throat sometimes with abdominal pain, nausea, headache and temperature. Throat is reddened and sometimes "nodes" can be felt in the neck.
Who Gets It	-	Anyone. Persons living in a dry climate seemed to get strep throat more often. Too, it is more common from December to May.
Prevention	-	When living in a dry climate, it seems to be of help to add moisture to the house. Air (cold steamer vaporizer or a humidifier), drink more liquids and keep the thermostat set at about 70-72 degrees. Keeping a house too warm dries out the air even more.
Treatment	-	Usually penicillin. As in use of any medication prescribed by a doctor, it is most important to take all of the medication. Often the symptoms will be lessened before the medication is used up. This is because some of the bacteria have been killed. If the treatment is not completed, the remaining bacteria can continue to grow and be passed to other people.

*(Adapted from You, Your Child, and Rheumatic Fever, American Heart Association.)

Precautions - A Group A strep always occurs before Rheumatic Fever. If the Group A strep is not treated completely, there is a danger of this disease. Rheumatic Fever is a dangerous and serious disease that affects many parts of the body and sometimes causes permanent heart damage. Refer to the pamphlet "You, Your Child and Rheumatic Fever" for more information.

Staphlococcal Infections

These infections are usually just called "Staph" infections and are very easy to pass to other persons.

Kinds of Infection - Skin (most common cause), lungs, pleura (lining of the lungs), heart, bones. The Staphlococcal bacteria is often in the throat but does not cause disease there.

Who Gets It - The following are conditions where "Staph" infections are most likely to develop:

Skin infections where pores have been plugged up by oily substances,
Burns,
Wounds with stitches,
Diabetes,
Malnutrition and other disease (flu, measles, pneumonia).

Precautions - Take special care of any of the above conditions and see a doctor if a wound is not healing properly or sores suddenly appear on the body.

Treatment - Follow the doctor's instructions to the letter! Isolation of infected person with careful handling and disposal of anything touched, especially dressings with drainage.

Keep all personal items separated - (the sick from the well), such as eating utensils, bed linens, towels and clothes.

Staph infections are difficult to treat because they can be passed from one person to another through the air, dust, personal articles or direct contact.

Be extra careful in keeping the house clean, especially toilets

Mountain-Plains Education & Economic Development Program, Inc.

Glasgow A.F.B., Montana 59231

File Code: 51.02.01.04.A2-4

Date Published: 8/12/75

Group Activity Package

Student: _____

Date: _____

TITLE: Communicable Diseases

OBJECTIVE:

As a result of group interaction, you will be provided with the opportunity to share ideas and opinions with others. The instructor may reinforce contents of the LAPs. A change in learning methods will provide variety to independent study.

EVALUATION PROCEDURE:

Pending

PREREQUISITES:

Complete LAPs on Introduction to Communicable Diseases and Diseases Prevented by Immunization.

RESOURCES:

Filmstrips:

Immunization 1/553 C-51 Microorganisms That Case Disease.

Immunization 1/551 C-51 Infectious Disease: Causes and Defenses.

Writing material
Surroundings favorable for discussion
35 mm projector

PROCEDURE:

Steps

1. Sign up for discussion group to be held at a mutually convenient time.
2. Introduction of topic by instructor.
3. View filmstrips.
4. Group interaction.
5. Summary.
6. Evaluation.

Principal Author(s):

File Code: 51.02.01.05.A2-0

Date Published: 8/19/75

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Venereal Diseases

OBJECTIVE:

Identify names of venereal diseases and their incubation and dormancy periods, symptoms, consequences, cure and precautions.

EVALUATION PROCEDURE:

Eight correct responses to a ten-item multiple-choice objective test.

RESOURCES:

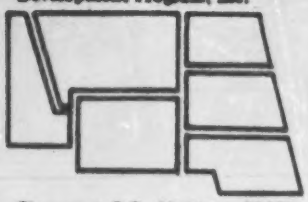
Filmstrip/cassette: "Venereal Disease: A Present Danger" (Parts I and II).
Venereal Disease (pamphlet). American Medical Association.
35mm filmstrip/cassette player.

PROCEDURE:

1. Watch parts I and II of the filmstrip: "Venereal Disease: A Present Danger."
2. Obtain and read the pamphlet Venereal Disease.
3. Complete study guide.
4. Complete LAP test with 80% score.

Principal Author(s): P. Myers

Mountain-Plains Education & Economic Development Program, Inc.



Glasgow A.F.B., Montana 59231

File Code: 51.02.01.06.A2-4

Date Published: 6-5-74

Group Activity Package

Student: _____

Date: _____

TITLE: Venereal Disease

OBJECTIVE:

As a result of group interaction, you will be provided with the opportunity to share ideas and opinions with others. The instructor may reinforce contents of the LAPs. A change in learning methods will provide variety to independent study.

EVALUATION PROCEDURE:

Pending

PREREQUISITES:

Complete LAP on Venereal Disease

RESOURCES:

Writing material
Surroundings favorable for discussion

PROCEDURE:

Steps

1. Sign up for discussion group to be held at a mutually convenient time.
2. Introduction of topic by instructor.
3. Group interaction.
4. Summary.
5. Evaluation.

Principal Author(s): P. Myers

File Code: 51.02.01.07.A2-0

Date Published: 11-06-74

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Heart Disease

OBJECTIVE:

Select appropriate answers which identify types of heart disease, define heart disease, and identify causes and prevention of heart disease.

EVALUATION PROCEDURE:

Eight correct responses to a ten-item multiple-choice objective test.

RESOURCES:

Information Sheet: "Heart Disease"

PROCEDURE:

1. Read information sheet "Heart Disease".
2. Complete study guide.
3. Complete LAP test with 80% score.

Principal Author(s): P. Myers

INFORMATION SHEET: HEART DISEASES*

Diseases of the heart lead all other diseases that kill Americans each year. Over 50% of all deaths, in the United States are due to the effects of various cardiovascular diseases. Among diseases classified as cardiovascular are the following:

Rheumatic Heart Disease - from rheumatic fever
Hypertensive Heart Disease - high blood pressure
Coronary Heart Disease - heart attacks
Congenital Heart Disease - born with heart defects

Cardiovascular means the heart and blood vessels.

The heart is a muscular pump as big as your fist. The right side of the heart receives blood from the body and pumps it through the lungs where it:

1) deposits carbon dioxide (wastes)
2) picks up oxygen

The left side of the heart receives the blood with new oxygen from the lungs and sends it through arteries into the body. Both sides of the heart (right and left) are protected by valves which permit blood flow in only one direction. Whenever one's heart is unable to circulate blood efficiently, he has HEART DISEASE.

*(Adapted from Health Ed for Young Adults, Jesse Haag, pp. 187-196.
Living in Safety and in Health, Jones, Wright, & Behlmer, pp. 102-107
Modern Home Medical Advisor, Morris Fishbein, pp. 364-381.)

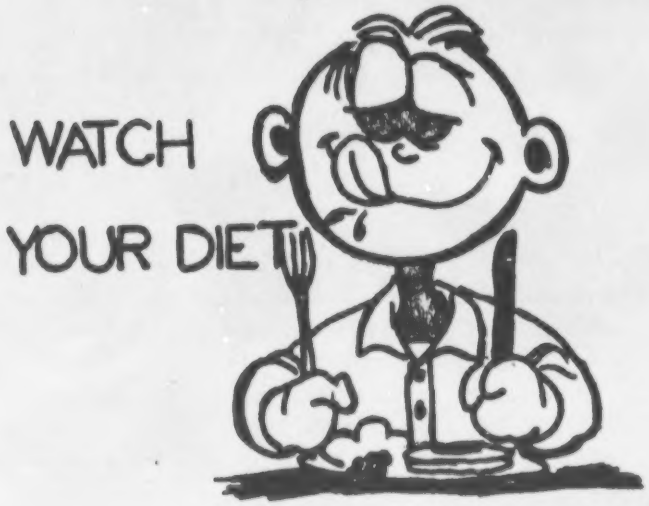
You now know there are various kinds of heart diseases and that together they are the major killers of Americans. This section will deal with ways you can help yourself and your family to prevent such diseases.

There is no one cause of heart diseases, rather there are many factors which could contribute. Factors which seem to influence the heart's health are:

1. Diet and Weight
2. Exercise
3. Smoking
4. Tensions
5. The regularity of medical checkups.

Each of the above factors will be discussed.

DIET - BEWARE OF CHOLESTEROL



Cholesterol (kō-le's-te'rōl) is a substance which our bodies manufacture and which is also present in the foods we eat. When more cholesterol than is needed is taken in by our bodies, the excess can be deposited in the arteries. This excess deposit can add to the build up of atherosclerosis, one of the causes of heart disease, because the blood cannot pass freely. The artery may become plugged where no blood can pass through.

The following list shows which foods are low and which are high in cholesterol.

LOW CHOLESTEROL FOODS

Fish and Seafood
Lean Poultry
Trimmed cuts of lean meat
Vegetable and fruit
Cereals
Buttermilk, Cottage Cheese
Potatoes
White, whole wheat and rye bread, plain rolls
Low-fat crackers
Poly unsaturated margarines and oils
Skim Milk
Spaghetti, Macaroni, etc.

HIGH CHOLESTEROL FOODS

Pastry and bakery products
Butter, ordinary margarine, cooking fats
Whole milk
Cream cheese
Liver
Kidneys
Fatty meats
Egg yolks - don't eat more than 2 or 3 per week.

So, in general, to cut the intake of cholesterol which can lead to atherosclerosis:

1. Eat less fat, substituting polyunsaturated vegetable oils and margarine for saturated fats.
2. Eat more fish or poultry in place of meat.
3. Eat fewer high cholesterol foods.

WEIGHT - BEWARE OF CALORIES

Watch

Your Weight

Calories are the energy producing value of food. If body activities do not use up all the energy available (the food you eat), the calories are stored as fat and weight gain takes place.

Normal weight is not an insurance against heart trouble, but a reduction of overweight usually improves the heart's condition. We know that people who are markedly over their normal weight have:

shorter life expectancy
greater likelihood of high blood pressure
increased blood cholesterol
diabetes

There is no quick, easy way to reduce. It is best to avoid extreme reducing diets, because they usually leave out foods essential to good health. Even when such diets are successful in bringing your weight down, they don't help you to develop a PATTERN OF EATING that will KEEP your weight normal.

EXERCISE - DO IT REGULARLY

As with any muscle, the heart muscle benefits from exercise. Exercise tends to reduce the risk of heart disease because arteries which supply blood to the heart improve their efficiency when exercise makes demands on them. Regular physical activity may help to prevent some types of heart disease. The key word is regular - taken irregularly, overdoses of exercise can be harmful. Don't be a weekend athelete - plan to stay in condition with physical activity every day.

Now, think about the regular physical activity which you do - do you do enough? The Recreation Department can help you on a plan of activity that will best suit your needs.

DON'T SMOKE

Cigarette smokers increase their risk of heart disease. Smoking affects the heart and blood vessels because the nicotine in tobacco smoke stimulates the part of the nervous system which controls the heart, blood vessels and other internal organs.

If you are or have been a heavy smoker, will it do any good to stop now? YES - smokers who stop can reduce this added risk.

AVOID WORRY

Avoid Worry

Worry, nervous tensions and emotional stress increase the blood pressure. Some people are under constant strain and tension. They worry, are nervous and irritable. In many people, tension constricts small arteries throughout the body. When this happens, the heart must increase the pressure of each beat to move through them - thereby increasing blood pressure - a cause of heart disease. To prevent this from happening, avoid situations which may cause stress. There are many tensions related to modern living - learn to control the daily situations you encounter that stimulate tenseness and nervousness. Do you know how to handle your emotions? If not, your counselor can help you find what is the best way for you to avoid tension.

HAVE REGULAR MEDICAL CHECKUPS

Get Regular Checkups

51.02.01.07.A2-0

One of the best ways to prevent all diseases, including heart disease, is to have regular medical checkups. For adults, it is recommended you see your doctor once a year. This means, at least once during the year when you are NOT sick. One way to remember is to make your birthday a reminder to have a checkup.

File Code: 51.02.01.08.A2-0

Date Published: 11-06-74

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Cancer

OBJECTIVE:

Identify types of cancer, its incidence in the United States, warning signs and prevention.

EVALUATION PROCEDURE:

Eight correct responses to a ten-item multiple-choice objective test.

RESOURCES:

Information Sheet: "Cancer"

PROCEDURE:

1. Read information sheet "Cancer".
2. Complete study guide.
3. Complete LAP test with 80% score.

Principal Author(s): P. Myers

INFORMATION SHEET: "CANCER"*

AWARENESS

The word cancer includes a group of related diseases that are characterized by abnormal growth and spread of body cells. These diseases are the number 2 cause of death in the United States today. It is estimated that one out of every four Americans will develop cancer sometime during his lifetime.

When the body loses control over cell reproduction (which is going on continuously), the new cells form a growth or tumor. A tumor is a swelling - a mass of cells. There are two kinds of tumors, benign and malignant.

Benign tumors are harmless because they stop growing after a period of time. They do the body no serious harm except when they become so large as to crowd other organs in the body.

Malignant tumors are cancers because they grow without limit. They do the body serious harm because they can destroy other tissues and organs and even life itself. Clumps of the abnormal cells can break off from the original tumor and be carried to other parts of the body. These abnormal cells settle into new tissues and build new tumors. This process of metastasis can start so many new tumors that the functions of the person's body cannot continue.

If a malignant growth is discovered before the cells break off and are carried to other parts of the body (metastasis), the cancer can usually be cured.

After the cells have spread there is little chance for cure; although, frequently cancer can be controlled for long periods of time.

There are three methods of treating cancers:

1. Surgery - if the cells are removed before metastasis, cancer is usually cured. Surgery may also be used to remove conditions that are likely to develop into cancer later.

2. Radiation - X-rays and radioisotopes are the usual forms.

3. Drugs (Chemotherapy) - this is giving drugs that will affect the cancer cells without injuring the person.

Additional informtion on the three methods of treatment are available in the Participant Resource File.

*(Adapted from Prevention of Communicable Disease, B. Haller Igel, Behavioral Research Laboratories, Palo Alto, 1972.)

As you can tell by reading the preceding page, the earlier a cancer can be treated the better chance there is for a cure. Each individual must be able to recognize the danger signs of cancer and bring them to a doctor. Any of the danger signs could be produced by a condition other than cancer, but prompt treatment of cancer is so essential it is foolish to take a "wait and see" attitude. If cancer is found, it can be treated; if cancer is not found, needless worry can be prevented. Remember the first signs of cancer are not pain or loss of weight. The American Cancer Society gives the following 7 danger signs.

1. Unusual bleeding or discharge.
2. A lump or thickening in the breast or elsewhere.
3. A sore that does not heal.
4. Prolonged change in bowel or bladder habits.
5. Persistent hoarseness or cough.
6. Persistent indigestion or difficulty in swallowing.
7. Change in the appearance of a wart or mole.

CANCER IN WOMEN

The four most usual sites of cancer in women are:

1. breasts
2. uterus
3. skin
4. gastro-intestinal tract.

The highest occurance of cancer in women happens during the menopause.

BREAST CANCER

Breasts should be examined once a month after the end of each period or within a few days. Use all four steps as described in the Handout.

The first evidence is a lump, usually painless. It may appear in any part of the breast, but the upper, outer quarter is most common.

"The roots" of the tumor grasp the columns of connective tissue between the muscle and the skin, causing these columns or ligaments to shorten. The skin tends to be pulled inward causing a puckered appearance. The same thing may happen with the nipple.

The skin may be stretched so that the pores become prominent making the skin look like the skin of an orange.

The nipple skin may become irritated but this is less common.

There tends to be a lower rate of cancer in women who breast fed their babies.

EXAMINE BREASTS MONTHLY FOR LUMPS OR THICKENING

UTERUS

This cancer most commonly occurs in the cervix: the bottom of the womb (uterus). Irregular bleeding is problably the first symptom. During the active menstrual life, it may occur between regular periods or as excessively heavy or prolonged monthly flow.

During menopause, it may be difficult to determine if unexpected bleeding is from irregularity due to the change of life or a tumor.

Vaginal bleeding which occurs immediately after douching or sexual intercourse can be a sign of cancer.

When bleeding occurs, the cancer has already caused ulceration or tissue damage. Therefore, women should have an examination of the pevic area every year which includes a Pap smear. Cancer in the cervix can be present long before bleeding occurs.

The vaginal Pap smear is a painless procedure done by the doctor and only takes seconds to perform. A small amount of secretion containing sloughed off cells is taken from the cervix and placed on a slide. The slide is studied under a microscope for the presence of cancer cells. These may appear before the actual cancer has invaded the uterus or cervix.

UNUSUAL VAGINAL BLEEDING SHOULD BE CHECKED BY A DOCTOR IMMEDIATELY

At the time of your pelvic exam you will be asked to lie down on the examining table with your knees drawn up and your feet in stirrups. All women feel uncomfortable and slightly embarrassed in this position. A nurse will usually be in the room to assist the doctor and make you feel more comfortable in this awkward situation.

SELF-EXAMINATION OF BREASTS

The best time for examination is at the conclusion of your menstrual period or within the next few days. The breasts should be examined every month at about the same interval of time.

Step 1

Sit straight before a mirror, arms relaxed at sides. Study contour of the breast. Has there been a change since the last examination?

Step 2

Raise arms high above the head and observe whether there is any change from the normal in size or shape of the breasts. Is there any dimpling or puckering on the skin?

Step 3

Lie down, place folded towel under shoulder, and raise arm above head on side being examined. With flat of fingers, feel gently the inner half of the breast.

Step 4

Then, bring arm down to side and feel gently the outer half of the breast, giving special attention to the upper outer section. Examine the other breast the same way.

1. Cysts or benign tumors can cause change in appearance of the breast.
2. Tumors of the breast are usually painless.
3. Almost all breast tumors can be felt before they are seen.

WARNING SIGNS

1. A hard lump
2. Deformity of the breast outline
3. Elevation of the breast
4. Dimpling or puckering of the skin
5. Retraction of the nipples
6. Bleeding or discharge of the nipples
7. "Orange peel" appearance of the skin

IF YOU NOTICE ANY OF THESE SYMPTOMS, SEE YOUR DOCTOR IMMEDIATELY!!!!!!!!!!!

SKIN

Skin cancer is the most common of all, but it is also the most curable. It can be easily seen and treated. The most frequent kind does not metastasize (travel) to other parts of the body and is slow growing. People with fair complexions seem to be especially prone to this type of cancer. Negroes rarely have it. Also it is more common in the south than in the north.

The first symptom is a dry scaly patch or pimple which persists after home treatment or as a pearly or waxy nodule. As the tumor grows it forms a scab and the area underneath becomes raw and moist.

Exposed parts of the body - the face, neck, forearms and back of hands - are common sites for cancer to begin.

A melanoma is a cancer that starts in a mole and turns dark. Moles should be removed if they are in areas thay might be irritated continuously.

ANY SORE, BLISTER, PATCH, PIMPLE, OR OTHER NEWLY DEVELOPED BLEMISH IN THE SKIN WHICH DOES NOT SHOW SIGNS OF HEALING IN A REASONABLE TIME - SAY THREE WEEKS - CALL A DOCTOR.

CANCER IN MEN

The most common sites of cancer in men are:

1. skin
2. lungs
3. gastro-intestinal tract
4. prostate gland
5. lower bowel

Cancer in men is not limited to those areas. Regular physical examination could lead to early detection and a probable cure if treated in time. Every individual should be aware of his body functions and not any prolonged changes (three weeks could be considered a prolonged change from a normal pattern). A doctor should be consulted early to avoid serious complications.

SKIN AND GASTRO-INTESTINAL TRACT

See Information listed under Cancer in Women

LUNG

Cancer of the lung is chiefly a disease of the males. The most constant first symptom is a cough. Any prolonged cough should be checked by a doctor. Even if it is not from cancer, the irritation could lead to a cancerous condition.

The cough of lung cancer sooner or later produces phlegm or "sputum". The one important indication is blood, and that should always be checked by a doctor. Another sign is a faint wheezing sound. A much later sign is a pain in the chest.

PROSTATE GLAND

This type of cancer is third most common in men and symptoms are rare. The most frequent way that this cancer is detected is by a rectal examination done by the doctor. All men over 50 should have this examination at least every year. After 50, the gland tends to enlarge and urinating ofter becomes difficult because the increased size of the prostate puts pressure on the urinary passage.

Treatment is surgical removal.

GASTRO-INTESTINAL TRACT STOMACH

Cancer of the stomach has a high death rate because people tend to wait too long before seeing a doctor. The symptoms are not easy to spot. The symptoms of indigestion are no different from the early symptoms of cancer.

Indigestion may be described as:

1. vague sense of unease related to the stomach
2. a feeling of fullness or bloating
3. mild nausea
4. heartburn
5. loss of appetite (feeling that one has eaten all he can after a few mouthfuls of food.)
6. excessive belching
7. pain

It is hard to recognize indigestion due to cancer in people who had ulcers and nervous stomachs for years.

INTESTINE

Early signs of cancer of the rectum and intestine.

1. bleeding (seen in the stool, or causing anemia or both)
2. persistent change in bowel habits - diarrhea or constipation, or both
3. increased intestinal gas

Hemorrhoids can mask cancer of the rectum. Both can be present in the same individual.

ANY PROLONGED CHANGE IN EATING OR BOWEL HABITS SHOULD BE CHECKED!

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Date Published: 11-06-74

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Diabetes

OBJECTIVE:

Define diabetes; identify its symptoms, treatment, detection, complications and the people most likely to develop the disease.

EVALUATION PROCEDURE:

8/10 acceptable score on attached 10 item multiple-choice test.

RESOURCES:

Information Sheet: "Diabetes".

PROCEDURE:

1. Read information sheet "Diabetes".
2. Complete study guide.
3. Complete LAP test with 80% score.

Principal Author(s): P. Myers

INFORMATION SHEET: DIABETES

WHAT IS DIABETES?

Diabetes, also called Diabetes Mellitus and Sugar Diabetes, is a disturbance of the metabolism or body chemistry. Diabètes results from a lack of the hormone insulin, which is secreted by the pancreas. When there is a lack of insulin, the body is unable to use properly the special form of sugar (glucose) that results from the digestion of sweet and starchy foods. Insulin usually helps turn these sugars and starches from food into energy, energy stored for future use (fat). The glucose just piles up in the blood stream and some of it passes from the body in the urine.

WHAT HAPPENS IF DIABETES IS NOT TREATED?

Many people think Diabetes is not serious. This misconception is understandable because most diabetics lead active lives and are gainfully employed. For example: Spencer Tracy, Ty Cobb, Dan Rowan and Thomas Edison were diabetics. However, if Diabetes is not controlled, it can be very serious. In the United States, Diabetes is the fifth leading cause of death. Diabetes is the second leading cause of blindness. Health hazards such as premature hardening of the arteries, kidney disease, gangrene, problems with childbirth, diabetic coma and insulin shock can all result from uncontrolled Diabetes. The earlier Diabetes is diagnosed and treated, the less likely these complications will occur.

WHAT ARE THE SYMPTOMS OF DIABETES?

The symptoms of Diabetes may vary from person to person. The symptoms depend on how severe the disease is. In adults, the symptoms usually come on slowly. In children, the symptoms develop more rapidly.

At the start of Diabetes, the diabetic's appetite increases and he just can't seem to get enough to eat. But because the body cannot make proper use of the food eaten, he begins to lose weight and energy.

The diabetic is also thirsty all of the time. He drinks a lot of water and other liquids. He also has to pass urine frequently during the day and at night. This is the body's way of passing out the sugar that has built up in the bloodstream. There are six symptoms one should watch for:

1. Loss of weight and energy.
2. Unusually big appetite.
3. Never-ending thirst.
4. Frequent passing of urine.
5. Itching of the skin.
6. Difficulty "throwing off" infections.

It is important to note a person could have some of these symptoms and NOT have Diabetes. These symptoms mean a doctor should be consulted. On the other hand, in some cases there may be NO SYMPTOMS AT ALL during the early stages of the disease.

The tests for Diabetes are very simple - all it takes is a sample of urine or a blood test. The urine is analyzed to see if sugar is present. If there is sugar in the urine, a test is made to see what the level of sugar is in the blood. The blood-sugar level is unusually high in Diabetes.

WHO GETS DIABETES?

Anyone can get Diabetes, but there are four kinds of people that are more likely to develop the disease. The four kinds of people are:

1. Most common in people of middle age and over.
2. More common in women than men.
3. More common in people who are overweight.
4. More common in people who have relatives who have developed Diabetes.

Many people have Diabetes and do not know it. This happens because even the most common symptoms are not always present. It is known there are over four million Diabetics in the United States.

WHAT IS THE TREATMENT OF DIABETES?

Although Diabetes is a serious disease, it can be controlled. There is no cure for Diabetes, but millions of Diabetics live normal useful lives because their Diabetes was detected and treated early. In many cases, proper diet and exercise are all that is needed. In other cases, oral drugs may be used to stimulate the production of insulin or help the body use the insulin more effectively. In certain cases, insulin must be given by injection. Diabetes is considered to be "under control" when the person passes nearly sugar-free urine and doesn't have other symptoms. This, of course, requires medical supervision and cooperation of the person.

THE PREVENTION OF DAMAGE FROM DIABETES

There are several things you can do to lessen your chances of developing Diabetes or preventing damage from occurring. First of all, AVOID BECOMING OVERWEIGHT. Just by maintaining proper weight, many people who have the tendency to develop Diabetes never do develop it. Secondly, HAVE PERIODIC MEDICAL EXAMINATIONS which include a test for Diabetes. In this way, Diabetes can be diagnosed and treatment started early. In the event of a diagnosed case of Diabetes, SEEK MEDICALLY SUPERVISED TREATMENT. This includes following the doctor's advice on diet, exercise, and drugs.

File Code: 51.02.02.00.A2-1

Date Published: 4/30/75

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Experience Guide

UNIT: HOME CARE OF THE ILL

RATIONALE:

This unit covers what family members can do to maintain health, prevent the spread of illness, and care for the ill person at home, should illness occur. Proper care of the ill person can lessen the severity of the illness as well as the disruption to family functioning.

OBJECTIVES:

Perform the following:
Recognize how to properly care for the ill at home, state how to correctly report symptoms, demonstrate how to read a thermometer, recognize how to maintain health.

RESOURCES:

Printed Materials

Home Nursing Programmed Instruction Student's Manual. American Red Cross, 1966.

Personal Health Record (5 age groups)

Student Health Handbook. Mountain-Plains Production, 1973.

Equipment

Thermometers, oral and rectal.

GENERAL INSTRUCTIONS:

Read the cover sheet for each prescribed LAP and follow the directions on each procedure step. Mark the time it has taken you to complete each LAP on the SPR. If you do not understand what to do after reading the procedure steps consult your instructor.

Principal Author(s): D. Ensrud, P. Myers

PERFORMANCE ACTIVITIES:

.01 Maintaining Health
.02 Precautions When Ill
.03 Symptoms
.04 Special Diets
.05 Taking a Temperature

EVALUATION PROCEDURE:

Complete the post test for each LAP as you finish it.

FOLLOW-THROUGH:

Go to the first assigned LAP.

File Code: 51.02.02.01.A2-0

Date Published: 8/19/75

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Maintaining Health

OBJECTIVE:

Identify good health habits and keep personal health records.

EVALUATION PROCEDURE:

Eight correct responses to a ten-item multiple-choice objective test, and evidence that records are kept.

RESOURCES:

Personal Health Record (5 age groups)

Information Sheets: "Maintaining Health"
"Personal Health Record"

PROCEDURE:

1. Read information sheets: "Maintaining Health" and "Personal Health Records."
2. Complete study guide.
3. Complete combined LAP test with 80% score after completing this LAP and LAP 51.02.02.02.
4. Keep a copy of a Personal Health Record for your family.

Principal Author(s): P. Myers

INFORMATION SHEET

Maintaining Health *

Health is described as "Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity". (World Health Organization). Health means more than the absence of disease.

To have good health you must be physically fit. You must also feel good about yourself and the way you get along with people. The physical, mental and social aspects of health are all inter-related and cannot be separated.

Exercise is essential to maintain a healthy body. The human body is built to be active. It thrives on exercise.

One benefit of exercise is to stimulate your circulation. When you exercise, your heart beats faster and more blood is pumped to all parts of the body. Food and oxygen are carried to all parts of the body by the blood stream. As the circulation of blood increases, more food materials and oxygen are taken to the various parts of the body.

Exercise increases your oxygen supply. As you exercise you breathe more rapidly and deeply. This makes more oxygen available for your body cells to use.

Exercise is also a good way to reduce tension. It improves the functioning of all parts of your body. Exercise builds up your endurance. It stimulates circulation and respiration. It gives you a chance to use your muscles.

The amount and kind of exercise you need varies with each individual. For example, age and physical fitness influence the amount of exercise that is good for you. It is a serious mistake to exercise so violently and so long that it takes hours to recover. It is wise to start a program of mild exercise and gradually work up to more strenuous activity.

If you have questions about exercise that is good for you, check with your doctor.

*(Adapted from Personal Health, B. Haller Igel, Behavioral Research Laboratories, Palo Alto, 1972, frames 1-14 and 356-389.)

INFORMATION SHEET: PERSONAL HEALTH RECORDS*

There are copies of the Personal Health Records available for your use for the following age groups:

Birth to 5 years
6 to 12 years
12 to 30 years
30 to 45 years
45 to 65 years.

The items listed in the left hand column tell you what things need to be done. The diagonal lines under the age group columns tell you when they should be done.

On your study guide write the items that you should have done this year to maintain health.

Copies of the personal health records are available for all age groups listed. If you wish to use them in planning and maintaining your family's health, take the number you need.

Remember these recommendations are for well people - symptoms may appear at any time that call for additional medical care.

*(Adapted from Personal Health, B. Haller Igel, Behavioral Research Laboratories, Palo Alto.)

PERSONAL HEALTH RECORD
BIRTH TO AGE 5

Item needed / Age	1 mo.	2 mo.	3 mo	4 mo	5 mo	6 mo	8 mo	10 mo	12 mo	15 mo	18 mo	21 mo	2 yr	3 yr	4 yr	5 yr
DPT		/	/	/							/					/
OPV		/		/							/					/
MMR									/							
Tuberoulin Test									/				/	/	/	/
Blood Test for Iron						/			/				/		/	/
Urine Test													/		/	/
Height every year	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
Weight every year	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
Head Circumf.	/	/	/	/							/					
Physical Exam	/			/			/		/		/		/		/	/
Hearing															/	/
Vision															/	/
Blood Pressure															/	/
Dental Exam														/	/	/

Comments:

Include Illnesses and Injuries.

PERSONAL HEALTH RECORD
AGE 6-12

Item needed	Age						
	6 yr	7 yr	8 yr	9 yr	10 yr	11 yr	12 yr
OT							/
Tuberculin Test	/	/	/	/	/	/	/
Blood Test for Iron							/
Urine Test				/			/
Height - every year	/	/	/	/	/	/	/
Weight - every year	/	/	/	/	/	/	/
Physical Exam				/			/
Hearing Test				/			/
Vision Test				/			/
Blood Pressure				/			/
Dental Exam every year	/	/	/	/	/	/	/

Comments:

Include Illnesses, Injuries and Specific Doctor Recommendations.

PERSONAL HEALTH RECORD
AGE 12-30

Item needed	Age in Years																		
	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30
D T	/										/								
Tuberculin Test	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
Blood Test for Iron											/								/
Urine Test											/								/
Chest X-Ray											/								/
Woman Pap Smear											/								/
Height- every yr.							/	/	/	/	/	/	/	/	/	/	/	/	/
Weight - every yr.	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
Blood Pressure	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
Physical Exam	/						/				/								/
Dental Exam	/						/				/								/
VDRL before marriage	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/

Comments:

Include illnesses, injuries and specific doctor's recommendations.

Remember:

Women need monthly breast exam following each period.

PERSONAL HEALTH RECORD
AGES 30-45

Item needed — Age in years

	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44
DT			/										/		
Tuberculin Test	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
Blood Test for Iron Both men and women			/										/		
Urine Test			/										/		
Chest X-Ray			/										/		
Pap Smear Women	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
Weight	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
Blood Pressure	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
			/										/		

Comments:

Include illnesses, injuries, and specific doctor's recommendations.

Women:

Monthly breast exam following period.

PERSONAL HEALTH RECORD
AGE 45-65

Item needed	Age in years																			
	45	46	47	48	49	50	51	52	53	54	55	56	57	58	59	60	61	62	63	64
DT								/										/		
Tuberculin Test	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
Blood Test for Iron																				
Urine Test	/			/			/			/			/			/			/	
Chest X-Ray	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
Pap Smear in Women	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
EKG																				
Weight Every year	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
B. P. Every year	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/
Pelvic Exam						/										/				
Rectal Exam every year	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/	/

Comments:

Include injuries illnesses and specific doctor's recommendations.

Women:

Breast exams monthly after period.

File Code: 51.02.02.02.A2-0

Date Published: 8/19/75

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Precautions When Ill

OBJECTIVE:

Identify precautions to be taken when someone is ill, to prevent the spread of diseases.

EVALUATION PROCEDURE:

Eight correct responses to a ten-item multiple-choice objective test.

RESOURCES:

Home Nursing Programmed Instruction Student's Manual, American Red Cross.

Information Sheet: "Precautions When Ill"

PROCEDURE:

1. Obtain Home Nursing Programmed Instruction Student's Manual. Read and do frames 52-85 (answer sheet attached).
2. Read information sheet: "Precautions When Ill."
3. Complete study guide.
4. Complete combined LAP test with 80% score after completing this LAP and LAP 51.02.02.01.

Principal Author(s): P. Myers

INFORMATION SHEET: PRECAUTIONS WHEN ILL

When someone is ill at your house, you want to prevent the other members of your family from getting the same thing. When someone has a communicable disease, there are precautions you can take to help prevent the other members of the family from getting it. In general, these precautions are the simple ordinary things you usually do. But when illness is around be extra careful.

The sick person should be kept away from the well ones as long as the disease is communicable (can be passed to others).

Persons caring for the sick person should wash their hands before and after touching the ill.

Wear a coverall or apron when giving care to the sick person so that the disease-producing microorganisms won't get into the clean clothes.

Provide the sick person with tissues for throat and mouth discharges. Remember, many disease-producing microorganisms are contained in those discharges.

Dispose of all contaminated wastes materials (tissues, paper dishes) immediately in a covered waste container.

Keep the sick person's personal articles (toothbrush, comb, bed linen, towel and wash cloth) separate from the well person's at home.

In case of communicable diseases disposable dishes can be used, but washing regular dishes and utensils in hot, soapy water and rinsing well with hot water is all right, too.

File Code: 51.02.02.03.A2-0

Date Published: 8/19/75

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Symptoms

OBJECTIVE:

Recognize types of symptoms and match symptoms to appropriate diseases for reporting them to a doctor.

EVALUATION PROCEDURE:

Eight correct responses to a ten-item multiple-choice objective test.

RESOURCES:

Information Sheet: "Symptoms"

PROCEDURE:

1. Read information sheet: "Symptoms."
2. Complete study guide.
3. Complete combined LAP test with 80% score after completing this LAP and LAP 51.02.02.02.

Principal Author(s): P. Myers

INFORMATION SHEET: "SYMPTOMS"

INTRODUCTION

In some cases of sudden illness, particularly those involving children, the concerned parent will not think rationally. There is some information that the doctor must know so that he may evaluate the condition of the patient.

LIST OF MAJOR AREAS TO NOTE

1. Where it is happening.
2. When it started.
3. What it is.

LIST OF SYMPTOMS TO NOTE BEFORE CALLING THE DOCTOR

1. Symptoms general or local.
2. Body temperature (taken by mouth, rectum, or armpit).
3. Type of cough (loose, dry, sudden, certain time of day, length of time).
4. Gastro-intestinal (breath odors, belching, difficulty in swallowing, heart burn, indigestion, vomiting) (constipation, diarrhea, color of stools).
5. Headache
6. Earache (pain, loss of hearing, abnormal sounds, discharge).

SYMPTOMS

Symptoms are the observable signs and personal feelings which indicate the presence of a disease or health condition.

There are two kinds of symptoms: Local and General

1. A local symptom is clearly limited to a specific part of the body. "I have a wart on the end of my nose" or "I have a swelling in my right knee" would describe local symptoms.

2. A general symptom involves more than one part of the body and could be described as: "I feel feverish and hot all over" or "I am unusually tired".

DESCRIBING THE SYMPTOM

Unless you are very sure of anatomy terms, you should try to describe areas by saying "front of chest", "near the right ankle" or "back of head".

"I stubbed my cranium....."

Being too vague can also be a problem: "It started when Aunt Martha was here..." "No, it was Aunt Mildred." "The pain was sharp..." "Well, maybe it was dull." Try to tell accurately when the pain was first noticed and how the pain felt.

It does not tell enough to say a person has a rash. It should be determined if the rash is local, (a rash on the hands might be caused by contact with poison oak) or general (hives over the entire body may indicate a food allergy).

BODY TEMPERATURE

Fever is a significant general symptom. 98.6 F. is simply an average body temperature and not necessarily the ideal body temperature. The most common cause of fever is infection.

An elevated temperature can be "useful" in helping to destroy disease germs. Fever can also have unpleasant symptoms such as headache, body ache and fatigue.

RESPIRATORY SYSTEM

The nose, lungs and passages between them (the parts of the body that have to do with breathing) are part of the respiratory system.

The most common body system to be affected by a high fever is the respiratory system. Many viruses and germs enter the body by way of the air we breathe.

Coughing may seem generalized; however, it is a local symptom for a respiratory problem. To say that a person has a cough is not adequate. Time is an important factor in describing a cough. Did it come on suddenly, is it worse in the morning or evening, are there other symptoms of a cold? Cough symptoms vary.

1. A sudden cough may indicate that an object has been swallowed.
2. A dry cough may indicate an allergy or asthma.
3. A loose cough may indicate bronchitis or pneumonia.
4. Chronic cough accompanied by a whooping noise may indicate whooping cough.
5. A cough with chest pain may indicate pleurisy.
6. A cough that is worse in the morning, but eases during the day may indicate chronic bronchitis.

A cough should be described by saying:
When it started (suddenly or gradually increasing).
How it sounds (loose or dry).
If there is chest pain.
When it occurs (more in the morning or evening, after eating).

Remember - only a doctor can diagnose what is wrong with you. You can help him/her make the diagnosis by describing the symptoms accurately.

Headache

Some causes of headache are simple eye strain, a hangover, injury, emotional strain, or a tumor. Headaches may be felt in front of the head, the back of the head, the top, or sides. It may be so intense that a person has to go to bed or so mild it can be ignored.

Ear Problems

Ear problems can be divided into four (4) main areas:

1. loss of hearing
2. pain
3. discharge
4. abnormal sounds (buzzing, ringing)

Unconsciousness

Comas can be divided into two (2) types: Those having local signs and those having non-local signs. Local symptoms indicate damage to the brain (fractured skull, stroke, accident victim). Non-local symptoms are caused by a general illness (severe infection, epilepsy, intoxication by alcohol or drugs and diabetic coma). There is a loss of consciousness, with no muscle twitching.

A stroke is different from a coma in that the person loses consciousness suddenly and awakens with paralysis or weakness on one side of the body.

Fainting is the result of lack of oxygen to the brain. Emotional stress, slow heart rate, low blood pressure, heat exhaustion, loss of blood or a blow to the head can be causes of fainting.

Epilepsy, brain injury, fever, brain tumor, poisons, or excessive drinking may be causes of convulsions. There is usually unconsciousness and involuntary twitching of the muscle groups.

GASTRO-INTESTINAL TRACT

Breath odors may be a good clue to origin of illness. Some diseases such as liver diseases, peritonitis and diabetes, have characteristic breath odors. Other causes may be nasal blockage, nasal infection or food imbedded in the tonsils.

Difficulty in swallowing usually implies a physical problem, perhaps a muscle spasm of the esophagus. A "lump in the throat" is usually a sign of anxiety and nervousness and is present even when not swallowing.

Belching can be done by some people by swallowing air and expelling it with force. It is also associated with "acid" or nervous stomach and ulcers. A sour taste or regurgitation of food should be noted. Belching may be a symptom of gall bladder, liver disease, heart failure or obstruction along the digestive system.

Heartburn is a painful burning sensation behind the breastbone. It is often caused by stomach acid in the esophagus. Heartburn can indicate an overly acid stomach.

Indigestion can be accompanied by heartburn and is a general upset feeling in the stomach. Abdominal disease, heart condition, and certain foods can cause stomach upset.

Vomiting can be caused by anything that disturbs the stomach locally--over-eating, swallowing sea water, castor oil or preparations used to induce vomiting. Other causes are intestinal obstruction, brain tumor, lead poisoning, or over-doses of some medicines.

Constipation could be a sign of bowel obstruction or irregular bowel habits.

Diarrhea is the repeated passage of unformed stools. It might be caused by foods that cannot be tolerated by certain individuals (onions, mushrooms, fruit, prunes). Emotional stress, foods contaminated by bacteria and viruses, infections and use of antibiotics are other causes of diarrhea. The danger of dehydration from loss of fluids should be considered.

The color of stools is an important symptom. Bleeding may be caused from a growth or tumor, internal hemorrhoids or be a sign of colitis. Black bowel movements may indicate bleeding is coming from stomach or upper intestine. It can also be black from food that was eaten recently such as rhubarb or blue-berries. Light colored stools are usually related to a dietary problem. Clay-colored stools can indicate a lack of bile, which might indicate a problem in the liver or gall bladder.

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

File Code: 51.02.02.04.A2-0

Date Published: 8/19/75

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Special Diets

OBJECTIVE:

Select special diets appropriate to certain physical problems.

EVALUATION PROCEDURE:

Eight correct responses to a ten-item multiple-choice objective test.

RESOURCES:

Home Nursing Programmed Instruction Student's Manual, American Red Cross.

Information Sheet: "Special Diets"

PROCEDURE:

1. Read information sheet: "Special Diets."
2. Obtain Home Nursing Programmed Instruction Student's Manual. Read and do frames 9-16 (answer sheet attached).
3. Complete study guide.
4. Complete LAP test with 80% score.

Principal Author(s): P. Myers

INFORMATION SHEET: SPECIAL DIETS

As you know, proper nutrition is essential for a person to grow and function properly. Nutrional needs and the body's ability to use foods may change during illness or other conditions; however, certain minimum foods are still necessary to continue life.

Nutrional needs vary according to the type of illness or condition present. For example, the nuring mother has a greater need for protein than other people. This protein is gained by eating more dairy products - one of the 4 basic food groups. Meeting the protein needs of the nursing mother can be termed "a special diet."

Another examples of special diets are the ones often used by Diabetics. Often the disease can be controlled merely by eating foods in a balance which the person can use properly.

The low calorie diet is a very common example. We have a tendancy to eat too much of the wrong things - which leads to extra weight. A low calorie diet - can give a person the minimum foods necessary to stay healthy and lose some of that extra weight.

Another common special diet is the low salt diet. This type of diet is often used for the person with heart or kidney problems or in pregnancy when water is being retained in the body instead of being passed normally.

One special diet that most everyone needs to use at one time or another is the clear liquid diet. Clear liquids are the easiest kinds of foods for the body to use when there is a problem in the gastro-intestinal tract, this includes the stomach and intestines, clear liquids will give the intestines a chance to "heal". Eating solid foods can irritate the intestines further. When someone has diarrhea, fluids are lost from the body. This loss of fluids is especially serious in old people and babies. A clear liquid diet is made up of fluids that one can see through, such as 7-Up, jello, broth and tea.

In summary

a diet - is the food customarily taken by a person from day to day to keep the body functioning.

a special diet - is the food taken by a person from day to day adjusted to keep the body functioning as normally as possible in illness or other conditions.

File Code: 51.02.02.05.A2-0

Date Published: 8/19/75

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Taking a Temperature

OBJECTIVE:

Identify parts, determine how to read, use and clean a medical thermometer.

EVALUATION PROCEDURE:

Eight correct responses to a ten-item multiple-choice objective test.

RESOURCES:

Home Nursing Programmed Instruction Student's Manual, American Red Cross.

Information Sheet: "Taking a Temperature"

Thermometer, oral or rectal

PROCEDURE:

1. Read information sheet: "Taking a Temperature."
2. Obtain Home Nursing Programmed Instruction Student's Manual. Read and do frames 132-161 (answer sheet attached).
3. Complete study guide.
4. Complete LAP test with 80% score.

Principal Author(s): P. Myers

INFORMATION SHEET: "Taking a Temperature"

It is normal for a person's temperature to be slightly different at different times during the day and night.

The average temperature of the body is 98.6 degrees F. A temperature that is higher than 99 degrees is usually a sign of an infection somewhere in the body. A temperature below 96.6 may be a sign that there is a malfunction of a body organ. Sudden drops or rises in temperature should be reported to the doctor, as they are danger signs.

Temperatures may be taken 3 ways:

1. by mouth (also called orally)
2. in the rectum (also called rectally)
3. in the armpit (also called axillary)

A rectal temperature will be about one degree higher than one taken by mouth. An armpit temperature is usually one degree lower than by mouth. You should state which method was used when reporting the reading to a doctor, for example - 98.8 degrees by mouth. The reading on a thermometer can be affected by smoking, drinking or eating hot or cold foods or chewing gum. Therefore, the person should not do those things for at least 5 minutes before having the temperature taken.

There are 2 kinds of thermometers that can be used to take a person's temperature:

1. oral - when the temperature is taken by mouth or under the armpit, this thermometer has a long slender bulb and is placed under the tongue to take the temperature for 3 minutes.
2. rectal - when the temperature is taken rectally on persons or children when it is not safe to take it orally. The rectal thermometer has a short, round bulb or a stubby bulb. The bulb must be lubricated with petroleum jelly, oil, or cold cream so it will slide into the rectum easily.

Every thermometer has 4 parts:

1. Bulb - the end of the thermometer containing a silvery liquid called mercury. This is the most soiled area as more germs are found here.
2. Scale - the side of the thermometer with lines and numbers.
3. Bubble - the construction in the tube that holds the mercury up in the tube.
4. Top - the end of the thermometer away from the mercury - the least soiled area.

File Code: 51.02.03.00.A2-1

Date Published: 4/30/75

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Experience Guide

UNIT: FAMILY LIFE EDUCATION

RATIONALE:

This unit presents some basic facts about the physical aspects of sexuality to promote an understanding of the sexual relationships within marriage. Considerations of family planning and forms of birth control are presented.

OBJECTIVES:

Identify and explain the organs and functions of the reproductive systems, define family planning and be aware of the available forms of birth control.

RESOURCES:

Printed Materials

Birth Control - All the Methods That Work and the Ones That Don't, Planned Parenthood, 1974.
Voluntary Sterilization for Men and Women, Planned Parenthood of America, Inc., 1973.

Audio/Visuals

Filmstrips: "Female Reproductive System," Human Reproduction Series, McGraw-Hill.
"Male Reproductive System," Human Reproduction Series, McGraw-Hill.

Equipment

Player, 35 mm filmstrip/cassette.

GENERAL INSTRUCTIONS:

Read the cover sheet for each prescribed LAP and follow the directions on each procedure step. Mark the time it takes you to complete each LAP on the SPR. If you do not understand what to do after reading the procedure steps, consult your instructor.

Principal Author(s): D. Ensrud, P. Myers

PERFORMANCE ACTIVITIES:

.01 Female Reproductive System
.02 Male Reproductive System
.03 Family Planning and Permanent Forms of Birth Control
.04 GAP: Family Planning

EVALUATION PROCEDURE:

Complete the post test for each LAP as you finish it.

FOLLOW-THROUGH:

Go to the first assigned LAP.

File Code: 51.02.03.01.A2-0

Date Published: 8/20/75

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Female Reproductive System

OBJECTIVE:

Identify specific parts and functions of the female reproductive system.

EVALUATION PROCEDURE:

Eight correct responses to a ten-item multiple-choice objective test.

RESOURCES:

Diagram: "Female Reproductive System"
Filmstrip: "Female Reproductive System," Human Reproduction Series.
Information Sheet: "Female Reproductive System"
35 mm filmstrip/cassette player

PROCEDURE:

1. Read information sheet: "Female Reproductive System."
2. View filmstrip: "Female Reproductive System."
3. Complete study guide.
4. Complete LAP test with 80% score.

Principal Author(s): P. Myers

INFORMATION SHEET: FEMALE REPRODUCTIVE SYSTEM

In order to understand the reproductive system of a woman one must know the names and functions of the organs. As each organ is described, locate it on the diagram attached to the information sheet. The pituitary gland is not found in the diagram.

Pituitary Gland is a small gland, the size of a pea, located at the base of the brain. This is the chief gland or control center. It gives out two types of chemical messengers, called hormones, into the bloodstream. One type of hormone controls body growth. The other type controls the menstrual cycle. It causes the ova, or eggs in the ovaries, to mature and ovulation (the release of an egg) to take place.

Ovaries - There are two ovaries, each is a small oval organ, about the size of a walnut which contain thousands of egg sacs. Once a month, one of the ovaries releases a mature egg cell which travels to the uterus, after it receives a signal from the pituitary gland. This process is called ovulation.

Fallopian Tubes are two hollow tubes, located at the upper left and upper right sides of the uterus. The end of each tube near the ovary widens into a funnel-shaped opening with small finger-like projections. These projections have a swaying, sweeping motion which helps send the egg cell through the tube to the uterus, after it has been released by the ovary.

Uterus - The uterus is a hollow, pear-shaped organ often called the womb. Within this organ the fertilized egg cell (ovum) develops into a baby. The inside lining of the uterus is called the endometrium. Each month this lining thickens, as it prepares to receive and nourish the fertilized egg cell. If the egg cell is not fertilized the uterus sheds this lining and menstruation occurs.

Vagina - The vagina is an elastic, funnel-shaped canal about 3-4 inches long located between the urinary bladder and the rectum. The lower end of the vagina opens to the outside of the body, and the vaginal canal passes upwards and backwards into the body. The upper end of this canal connects with the uterus by means of a small opening in the cervix (or neck of the uterus). The menstrual flow comes from the uterus, passes through the cervix and the vagina and leaves the body. The vagina is the passageway which expands so a baby can pass from the uterus and be born. The vagina is also the opening which receives the male penis during sexual intercourse.

Vulva - The protective outer part of the reproductive system is called the vulva. The vulva consists of two layers of soft fleshy folds. The outer, larger layer which is covered with pubic hair is called the labia majora. Enclosed within the labia majora are the labia minora. These labia or lips,

join together at the upper ends to form a fold which partly shelters the clitoris.

The clitoris is a small organ which is especially sensitive to sexual stimulation. Beneath the clitoris is the urethra through which urine is eliminated from the body. Below, is the vaginal opening orifice which is the opening through which the menstrual flow comes.

Hymen - The hymen is a flexible membrane around the opening of the vagina. This thin membrane may be broken by a tampax, through intercourse or by strenuous exercise. The hymen is easily broken and there is no discomfort. A woman usually cannot even tell when the hymen has broken.

Diagram showing internal female anatomy

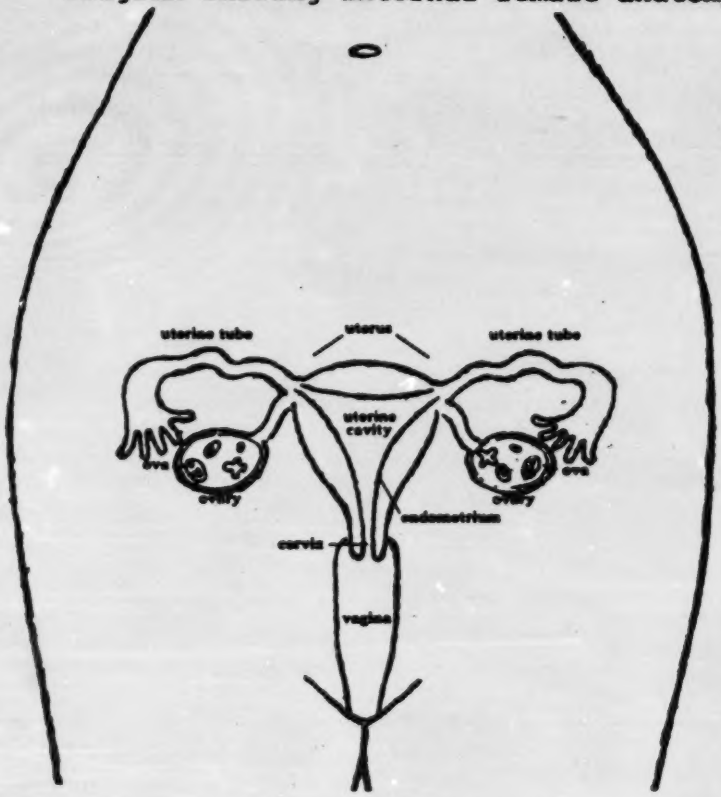

Diagram showing external female anatomy

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Glasgow AFB, Montana 59231

File Code: 51.02.03.02.A2-0

Date Published: 8/20/75

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Male Reproductive System

OBJECTIVE:

Identify specific parts and functions of the male reproductive system.

EVALUATION PROCEDURE:

Eight correct responses to a ten-item multiple-choice objective test.

RESOURCES:

Filmstrip: "Male Reproductive System," Human Reproduction Series.
Information Sheet: "Male Reproductive System"
35 mm filmstrip/cassette player.

PROCEDURE:

1. Read information sheet: "Male Reproductive System."
2. View filmstrip: "Male Reproductive System."
3. Complete study guide.
4. Complete LAP test with 80% score.

Principal Author(s): P. Myers

INFORMATION SHEET: MALE REPRODUCTIVE SYSTEM

As each organ is described, locate it on the diagram which is attached.

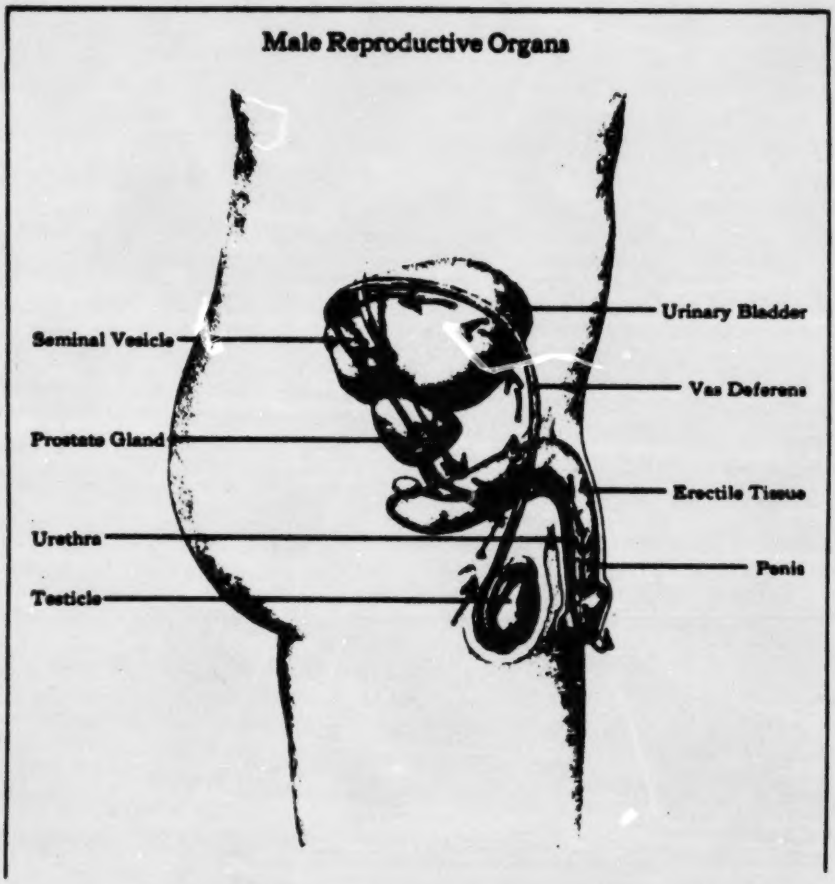
Unlike the female, the sex organs of the male lie primarily outside the body. The most apparent male sex organ is the penis. The head of the penis is partially covered by the foreskin. This is usually removed shortly after birth for health reasons by a minor surgical operation know as circumcision. The penis is made up of muscle tissue which becomes stiff during sexual excitement due to increased blood flow. The penis is in front of the scrotum, a sac of loose skin that contains the testicles.

The testicles, or testes, make the male hormone testosterone, which causes changes that turn boy into man, physically. As the boy develops, the testicles grow bigger and the scrotum enlarges to make room for them. The testes also produce spermatozoa, or sperm, which are the male reproductive cells.

Sperm leaves the testicles through a small, thick-walled tube, the vas deferens. Millions upon millions of sperm cells swarm through the prostate where they are then mixed with a milky fluid called semen. The semen is made by a gland called the seminal visicle located behind the urinary bladder. This semen passes out of the body through the uretha. Urine also passes through the uretha, but always at a different time. With a final surge the semen passes through the uretha and out of the body. This is known as ejaculation and occurs in short, abrupt spurts usually during sexual intercourse.

Frequently, when a boy reaches puberty, he has involuntary ejaculations when he sleeps. These are called nocturnal emissions or wet dreams because sexually stimulating dreams sometimes accompany them. This is a normal occurrence of adolescence.

Sperm can live up to 48 hours in the female, although many of them will die before then. If sperm reaches the female egg cell, one sperm will join with the female egg and pregnancy will begin. The meeting of one male sperm with one female egg is called conception.



The arrow shows the passage of sperm through the vas deferences from the testicles.
Through the seminal vesicle where sperms are mixed with semen
Through the prostrate gland
Through the penis to outside the body.

File Code: 51.02.03.03.A2-0

Date Published: 6-3-74

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Activity Package

Participant: _____

Date: _____

PERFORMANCE ACTIVITY: Family Planning and Permanent Forms of Birth Control

OBJECTIVE:

Identify all types of birth control including permanent forms.

EVALUATION PROCEDURE:

8/10 score on attached multiple choice test.

RESOURCES:

"Birth Control - All the Methods That Work and the Ones That Don't"
"Voluntary Sterilization for Men and Women"
Information Sheet: "Family Planning"

PROCEDURE:

Steps

1. Obtain and read the above mentioned booklets.
2. Complete Study Guide.
3. Complete post test with 80% score.

Principal Author(s): P. Myers

INFORMATION SHEET: FAMILY PLANNING

Family planning contributes to family stability. It protects the mother who is ill, the mother who is exhausted from bearing too many children and the parents who want to postpone having babies until they can give them emotional and material support. Family planning helps the couple who feel they should have no children at all because one or both carries a hereditary disease. Above all, it protects the child, so that he will not come into the world without a welcome from his family and proper support for his future.

Family planning is to have children by choice instead of by chance. A Family Planning Program helps all mothers and babies to have good health by spacing and planning pregnancies. Its goal is to have every child a wanted child.

Some of the services offered by a Family Planning Program in different communities are:

1. Education and instruction on all methods of birth control including their advantages and disadvantages.

2. A medical examination by a doctor, laboratory test, and pap smear. Follow up and annual examinations are provided.

3. Infertility services for couples who have been unable to have children.

4. Information and performance of vasectomies and tubal ligations.

5. Pre-marital counseling.

6. Treatment of minor infections.

7. Pregnancy tests.

8. Transportation and babysitting are sometimes available to women going to the clinic.

Today, more and more people believe that no baby should be conceived irresponsibly. Human beings are too precious to be brought into a world where they will be deprived from the start and will have no chance of normal development.

There are many methods of birth control which can be used to prevent unwanted babies. If one method doesn't work, try another. For people who say they cannot financially afford birth control, this question should be asked, "Can you afford a baby?"

If interested in becoming involved in the Family Planning Program, look in the phone book for Planned Parenthood. If there is no Planned Parenthood, look under Department of Health or Family Planning. If you cannot find it, call a hospital, clinic, or talk to your doctor. The Health Education program has information on all aspects of family planning should you wish more.

Mountain-Plains Education & Economic Development Program, Inc.

Glasgow A.F.B., Montana 59231

File Code: 51.02.03.04.A2-4

Date Published: 6-5-74

Group Activity Package

Student: _____

Date: _____

TITLE: Family Planning

OBJECTIVE:

As a result of group interaction, you will be provided with the opportunity to share ideas and opinions with others. The instructor may reinforce contents of the LAPs. A change in learning methods will provide variety to independent study.

EVALUATION PROCEDURE:

Pending

PREREQUISITES:

Complete LAPs on Male and Female Reproduction, Family Planning, and Permanent Forms of Birth Control

RESOURCES:

Writing material
Surroundings favorable for group discussion

PROCEDURE:

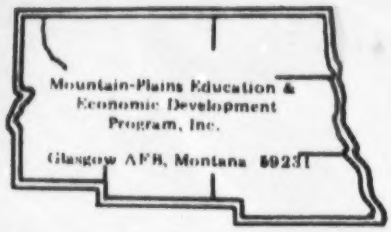
Steps

1. Sign up for discussion group to be held at a mutually convenient time.
2. Introduction of topic by instructor.
3. Group interaction.
4. Summary.
5. Evaluation.

Principal Author(s): P. Myers

File Code: 51.02.04.00.A2-1

Date Published: 4/30/75



Learning Experience Guide

UNIT: DENTAL HYGIENE

RATIONALE:

Improper care of the teeth and mouth not only affects one's employability, but is often the cause of discomfort and a severe drain on a family's financial resources. This unit presents some basic facts to maintain a good dental health.

OBJECTIVES:

Recognize the importance of dental hygiene and state the steps necessary to maintain good dental hygiene.

RESOURCES:

Printed Materials

Break the Chain of Tooth Decay, American Dental Association.
Why You Should Use Dental Floss, Johnson & Johnson.

Equipment

Toothbrush
Dental floss, unwaxed

GENERAL INSTRUCTIONS:

Read the cover sheet for each prescribed LAP and follow the directions on each procedure step. Mark the time it takes you to complete each LAP on the SPR. If you do not understand what to do after reading the procedure steps, consult your instructor.

PERFORMANCE ACTIVITIES:

.01 Teeth and Dental Floss

Principal Author(s): D. Ensrud, P. Myers

EVALUATION PROCEDURE:

Complete the post test for each LAP as you finish it.

FOLLOW-THROUGH:

Go to the first assigned LAP.

File Code: 51.02.04.01.A2-0

Date Published: 8/20/75

Mountain-Plains Education & Economic Development Program, Inc.
Glasgow AFB, Montana 59231

Learning Activity Package

Student: _____

Date: _____

PERFORMANCE ACTIVITY: Teeth and Dental Floss

OBJECTIVE:

Recognize causes of tooth decay and select appropriate preventive measures.

EVALUATION PROCEDURE:

Eight correct responses to a ten-item multiple-choice objective test.

RESOURCES:

Information Sheets: "Why Teeth"
"Toothbrushing"
Pamphlets: "Break the Chain of Tooth Decay"
"Why You Should Use Dental Floss"
Toothbrush
Dental floss, unwaxed

PROCEDURE:

1. Read information sheets.
2. Read pamphlets: "Break the Chain of Tooth Decay" and "Why You Should Use Dental Floss."
3. Complete study guide.
4. Complete Unit/LAP post test with 80% score.

Principal Author(s): P. Myers

INFORMATION SHEET: "WHY TEETH?"

You may wonder why you should be concerned about your teeth. There are several resons. First, the mouth and teeth are one of the first things people notice about you. An attractive mouth and clean breath are essential for success in most walks of life. Anyone who wants a job that requires face-to-face meetings with other people is not likely to get by with unsightly teeth or bad breath. To get a job today, you face stiff competition. If you are handicapped by unsightly teeth or bad breath, your chances of getting the job you want may be lessened. In other cultures or countries the mouth is not so important, but today in America it is desirable to have a clean mouth. Having healthy teeth may not guarantee you success, but it certainly will not stand in your way.

In the second place, the teeth determine the shape of the mouth and help you to speak clearly and distinctly. Can you think of a child who has lost some of the baby teeth? Remember how difficult it was for him to say words that begin with the letters th; such as, there, thought, and those. Also think of words that begin with the letter "s". The front teeth help you say those words plainly. Therefore, teeth not only affect how you look but are also an important part in talking.

In addition to the things mentioned, there is a third reason why teeth are important. Teeth help you prepare the food you eat for proper use by the body. When food is well chewed, the stomach can prepare it for use in other parts of the body. If food is not well chewed, it may hinder the digestion process. In this case you are not getting all the nutrients you could be getting from your food. There are several shapes of teeth --- the sharp pointed and broad teeth. Each shape has a special duty in chewing food. It is necessary to remember that the food must be chewed long enough for each of the teeth to do their work well. When food is chewed long enough, it becomes very soft and moist. When this happens, food is then ready for the stomach.

You know that not everyone can be beautiful or handsome, but do you know there are things that everyone can do to improve their appearance. In order to know more about how to improve the health of teeth, you need to know all about the teeth. In the following LAP's, you will be able to find out more about teeth and specific practices to improve them.

INFORMATION SHEET: TOOTHBRUSHING

The purpose of toothbrushing is to clean the teeth and gums and to remove any bits of food that are caught between the gums and teeth. Brushing after eating helps to destroy some of the bacteria before they can act upon any sugar to form acid which causes decay.

A good toothbrush is important for good dental care. When buying a toothbrush, you should look for one that has a flat brushing surface, firm bristles (not hard), and correct size for your mouth. Children should have a smaller toothbrush to enable them to clean all surfaces of their teeth. The toothbrush should be rinsed thoroughly and hung to dry.

The main purpose of a dentifrice (toothpaste or powder) is to help the toothbrush clean the teeth. Clinical studies have shown that some of the dentifrices which contain flouride help to prevent decay if they are used in a conscientious manner. Professional dental care is also a very important part of dental care.

In brushing teeth you should be sure to clean all surfaces of the teeth. There are three areas of main importance. They are the outer surface, the inner surface and top surface of each tooth. The outer and inner surface of the teeth should be brushed the way they grow (upper teeth down; lower teeth up). You should start to brush where the tooth and gum meet. You should work the bristles of the toothbrush between each tooth and moving back and forth in a swishing motion to the end of each tooth. The top surface should be brushed with a scrubbing motion. Each surface should be brushed at least ten times. Make sure to brush down far enough to clean the gums while brushing the teeth.

Although it is not known how much tooth decay is prevented by brushing, it is known that it helps in having healthy teeth and mouth.

It is also important to have regular check-ups with a dentist but daily care is essential for good dental care.